## APPENDIX C: SURVEY FORMS

1. Form EIA-457A 2009 Residential Energy Consumption Survey Household Questionnaire
2. Form EIA-457C Rental Agents, Landlords, and Apartment Managers Questionnaire
3. Form EIA-457D Household Bottled Gas (LPG or Propane) Usage
4. Form EIA-457E Household Electricity Usage
5. Form EIA-457F Household Natural Gas Usage
6. Form EIA-457G Household Fuel Oil or Kerosene Usage

## Appendix C. 1

# U.S. Department of Energy Energy Information Administration 

## Household Questionnaire

## INTRODUCTION TO INTERVIEW

Hello, I am $\qquad$ from the $\qquad$ We are conducting a study for the U.S. Department of Energy about energy consumption in homes.

Although your participation is voluntary, we hope you will participate in this important study of energy usage. Your identity and all the responses you give me will be kept strictly confidential and data will be used for statistical purposes only. We estimate the reporting burden (the time it will take to complete this survey) for this collection of information to average 52 minutes per response.

Any comments you may have regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, should be sent to the Energy Information Administration, Statistics and Methods Group, EI-70, 1000 Independence Ave., SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

## Section CIR: CASE IDENTIFICATION RECORD

## CIR-1 FIID1 INTERVIEWER INSTRUCTION: ENTER YOUR FIELD INTERVIEWER IDENTIFICATION

 NUMBER.Field Interviewer ID Number


CIR-2 SAMPLEID INTERVIEWER INSTRUCTION: ENTER THE RECS SAMPLE IDENTIFICATION NUMBER FOR THIS HOUSING UNIT.

Sample ID Number ......................................... $\square$

CIR-3 STATEID INTERVIEWER INSTRUCTION: ENTER THE STATE IDENTIFICATION NUMBER FOR THIS HOUSING UNIT.

State ID Number


CIR-4 TYPEHUQ INTERVIEWER INSTRUCTION: RECORD THE TYPE OF HOUSING UNIT AS YOU
RECORDED IT IN YOUR HOUSING UNIT NOTES ON PAGE 6 OF THE HOUSING UNIT
NOTES/MEASUREMENT BOOKLET FOR THIS CASE.

Single-family detached house (a one-family house detached
from any other house)............................................................... 2
Single-family attached house (a one-family house attached to one or more houses)3
Apartment in a house or a building with 2-4 units ..... 4
Apartment in a building with 5 or more units ..... 5
Mobile home (manufactured home, trailer) ..... 1
CIR-5a [If TYPEHUQ=5] NUMFLRS INTERVIEWER INSTRUCTION: RECORD THE NUMBER OFFLOORS IN THIS APARTMENT BUILDING AS YOU RECORDED IT IN YOUR HOUSING UNITNOTES ON PAGE 6 OF THE HOUSING UNIT NOTES/MEASUREMENT BOOKLET FOR THIS CASE.

Number of floors $\qquad$

CIR-5b [If TYPEHUQ=5] NUMAPTS INTERVIEWER INSTRUCTION: RECORD THE NUMBER OF APARTMENTS IN THIS BUILDING AS YOU RECORDED IT IN YOUR HOUSING UNIT NOTES ON PAGE 6 OF THE HOUSING UNIT NOTES/MEASUREMENT BOOKLET FOR THIS CASE.

Number of units $\qquad$
$\square$

[^0]No.
.0
A-4 [If STUDIO=0] ONEFLRAPT Is the living space of your entire apartment unit on a single level?
Yes

```
\(\qquad\)
```

No.0
A-4a [If ONEFLRAPT=0] NAPTFLRS How many levels does your apartment unit have? Number of levels

``` \(\qquad\)

A-5 [If TYPEHUQ=2,3] STORIES INTERVIEWER INSTRUCTION: SHOW CARD 2. Please look at Card 2. Not including basements or attics, how many stories does your home have?
\(\qquad\)
One story10
Two stories ..... 20
Three stories ..... 31
Four or more stories ..... 32
Split-level ..... 40
Some other type (Specify

\(\qquad\)
 ). ..... 50

A-6 [If TYPEHUQ=1] TYPEHUQ4 Does your mobile home have any permanently attached structures, such as a room or porch that is enclosed from the wind and rain, that weren't part of the mobile home when it was first manufactured?

Yes ................................................ 1
No

A-7 BEDROOMS [If STUDIO=0,9] How many bedrooms do you have in your home? [If TYPEHUQ=2, 3,4: Include bedrooms in finished attics or finished basements.]

Number of bedrooms \(\qquad\)
\(\square\)

A-8 NCOMBATH A full bathroom is one that has a sink with running water, a toilet, and either a bathtub or shower. How many full bathrooms do you have in your home?

Number of full bathrooms \(\qquad\)
\(\square\)

A-9 NHAFBATH A half-bathroom is one that has either a toilet or a bathtub or a shower. How many half bathrooms do you have?

Number of half bathrooms


A-10 OTHROOMS [If STUDIO \(=0,9\) ] Now think about other rooms in your home besides bedrooms and bathrooms. Not including unfinished areas, hallways, and closets, how many other rooms are there in
your home?
Number of other rooms \(\qquad\)

A-11 [If TYPEHUQ=2,3,4] Now think about the foundation of your home. Is any part of your home over a... (Mark all that apply.)


A-11a [If CELLAR=1] BASEFIN Is any part of the basement finished? That is, does it have finishing materials on the floor, ceiling, and walls?

Yes............................................... 1
No .0

A-11a1 [If BASEFIN=1] FINBASERMS How many finished rooms are there in your basement?

Number of finished basement rooms \(\qquad\)
A-11b [If CELLAR=1] BASEHEAT About how much of the basement is heated during the winter months? Is it...

All, ... .. 1
Part, or .. 2
None? .. 0

A-11b1 [If BASEHEAT=2] PCTBSTHT INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look at Card 3. What portion of the basement is heated during the winter months?

> Very little (1-4\%) ........................................ 1 Some (5-33\%)...................................................................................................... 4 About half (34-66\%)...............................................

A-11c [If CELLAR=1] BASECOOL About how much of the basement is air conditioned during the summer months? Is it...

All,
.1
Part, or .2
None?............................................. 0
A-11c1 [If BASECOOL=2] PCTBSTCL INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look at Card 3. What portion of the basement is air conditioned during the summer months?

Very little (1-4\%) ........................................ 1
Some (5-33\%).............................................. 2
About half (34-66\%).................................... 3

About three-quarters (67-95\%).................... 4
Most of it (96-99\%)..................................... 5
A-11d [If CELLAR=1 and TYPEHUQ=4] BASEUSE About how much of the basement would you say you have exclusive use of? Is it ...

All,
.1
Part, or .2
None? .0

A-12 [If TYPEHUQ=2,3,4] ATTIC An attic is an area directly below the roof, accessible by stairs, with space for you to stand and move about. Does your home have an attic?

Yes .1
No .. 0

A-12a [If ATTIC=1] ATTICFIN Is any part of the attic finished? That is, does it have finishing materials on the floor, ceiling, and walls?

Yes................................................ 1
No 0

A-12a1 [If ATTICFIN=1] FINATTRMS How many finished rooms are there in your attic?
Number finished attic rooms \(\square\)
A-12b [If ATTIC=1] ATTCHEAT About how much of the attic is heated during the winter months? Is it...

All, .1
Part, or .2
None? . 0

A-12b1 [If ATTCHEAT=2] PCTATTHT INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look at Card 3. What portion of the attic is heated during the winter months?

Very little (1-4\%) ........................................ 1
Some (5-33\%)............................................... 2
About half (34-66\%)..................................... 3
About three-quarters (67-95\%)..................... 4
Most of it (96-99\%) ..................................... 5
A-12c [If ATTIC=1] ATTCCOOL About how much of the attic is air conditioned during the summer months? Is it...

All,1

Part, or .......................................... 2
None? .. 0

A-12c1 [If ATTCCOOL=2] PCTATTCL INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look at Card 3. What portion of the attic is air conditioned during the summer months?

Very little (1-4\%)
. .1
Some (5-33\%) ..... 2
About half (34-66\%) .....  3
About three-quarters (67-95\%). ..... 4
Most of it (96-99\%) ..... 5
A-12d [If ATTIC=1 and TYPEHUQ=4] ATTICUSE About how much of the attic would you say you have exclusive use of? Is it...
All, .....  1
Part, or ..... 2
None? ..... 0
A-13 [If TYPEHUQ=1,2,3] PRKGPLC1 Does your home have a garage that is attached to or part of your home?
Yes ..... 1
No ..... 0A-13a [If PRKGPLC1=1] GARAGE1C GARAGE2C GARAGE3C What is the size of that attachedgarage? Is it a...
One-car garage, ..... 1
Two-car garage, or .....  2
Three-or-more-car garage? ..... 3
A-13a1 [If PRKGPLC1=1] GARGLOC Is the garage attached to or part of the [IfCELLAR=1: basement,] first floor, or some other floor of the home?
Basement ..... 1
First floor ..... 2
Some other floor .....  3
A-13a2 [If PRKGPLC1 = 1] GARGHEAT Is the garage heated during the winter months?
Yes. ..... 1
No. ..... 0
A-13a3 [If PRKGPLC1=1] GARGCOOL I
 Is the garage air conditioned during the summer months?
Yes ..... 1
No ..... 0A-13b [If PRKGPLC1=0] PRKGPLC2 Does your home have a detached garage or covered carport?
Yes

\(\qquad\) ..... 1
No ..... 0
A-13b1 [If PRKGPLC2=1] Which does your home have? Is it a... (Mark all that apply.)
DGARG1C One-car garage, .....  1
DGARG2C Two-car garage, ..... 2
DGARG3C Three-or-more-car garage, or ..... 3
CARPORT Carport? ..... 4

A-14
KOWNRENT Do you or members of your household own this home or do you rent it?
Own/Buying ............................................... 1
Rent ............................................................. 2
Occupied without payment of rent.............. 3
A-14a [If KOWNRENT=2,3] HUPROJ Is this residence part of a public housing authority?
\(\qquad\)
No . .0

A-14a1 [If HUPROJ=0] RENTHELP Does your household receive financial assistance from the federal, state, or local government to help pay part or all of the rent?
\[
\begin{aligned}
& \text { Yes................................................................................................... } \\
& \text { No }
\end{aligned}
\]

KOWNCOND Is this home part of a condominium or cooperative?
Yes ............................................... 1
No.................................................. 0
A-15a [If KOWNCOND \(=1]\) CONDCOOP Which is it, a condominium or a cooperative?
Condominium ............................... 1
Cooperative
.. 2

YEARMADE In what year was this structure built? Your best estimate is fine.
Year built \(\qquad\)
\(\square\)

A-16a [If YEARMADE=DK] YEARMADERANGE INTERVIEWER INSTRUCTION: SHOW CARD 4. Please look at Card 4. Although you do not know the exact year this structure was built, it is helpful to have an estimate. About when was this structure built??

Before 1950
1950 to 1959
1960 to 1969
1970 to 1979
1980 to 1989
1990 to 1999
2000 to 2004
2005 to 2009

A-17 OCCUPYY In what year did your household move in? Your best estimate is fine.
Year moved in \(\qquad\)
\(\square\)
A-17a [If OCCUPYY=DK] OCCUPYYRANGE INTERVIEWER INSTRUCTION: SHOW CARD 4. Please look at Card 4. Although you do not know the exact year your household moved in, it is helpful to have an estimate. About when did your household move in?
Before 1950
1950 to 1959
1960 to 1969
1970 to 1979
1980 to 1989
1990 to 1999
2000 to 2004
2005 to 2009
A-18 [If OCCUPYY \(=2008,2009]\) OCCUPYM In what month of that year did your household move in?

January ........................................ 01
February .................................... 02
March .......................................... 03
April ............................................ 04
May ............................................. 05
June ............................................. 06

July ............................................. 07
August ....................................... 08
September ................................... 09
October ....................................... 10
November ................................... 11
December.................................... 12
A-19 URBRUR Which of the following best describes the location of your home? Do you live in a city, a town, the suburbs, or in a rural area?
City................................................ 1
Town .............................................. 2
Suburbs ......................................... 3
Rural.............................................. 4
A-20 UGASHERE Is natural gas from underground pipes available in this neighborhood?
Yes ................................................ 1
No .................................................. 0
A-21 IVCOMMA INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE CHARACTERISTICS OF THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. COMMENTS ARE NOT REQUIRED BUT ARE ENCOURAGED TO DESCRIBE UNIQUE HOUSING UNIT OR HOUSEHOLD CHARACTERISTICS. USE THIS SPACE TO HELP EXPLAIN EXTRAORDINARY OR ABNORMAL RESPONSES.
\(\qquad\)
\(\qquad\)
\(\qquad\)

\section*{Section B: KITCHEN APPLIANCES}

SECTION INTRODUCTION: Now I would like you to think about the appliances in your kitchen.
```

B-1 STOVEN INTERVIEWER INSTRUCTION: SHOW CARD 5. First, I'd like to ask you about major cooking appliances. Please look at Card 5. Shown in the first picture is a stove, which has both a cooktop and an oven. How many stoves do you have?
Number of Stoves. $\square$
B-1a [If STOVEN $>0$ ] STOVENFUEL What fuel does your [If STOVEN $>1$ : most used] stove use? Is it . . .

```

Electricity, .............................................................................. 05
Natural gas from underground pipes, ..................................... 01
Propane (bottled gas), or......................................................... 02
Some other fuel? (Specify__ ......................... 21

B-2 STOVE Now look at the second picture. How many separate cooktops do you have?
Number of Separate Cooktops... \(\square\)
B-2a [If STOVE>0] STOVEFUEL What fuel does your [If STOVE>1: most used] separate cooktop use? Is it . . .

Electricity, ............................................................................... 05
Natural gas from underground pipes, .................................... 01
Propane (bottled gas), or......................................................... 02
Some other fuel? (Specify__ ......................... 21

B-3 OVEN Now look at the third picture. How many separate wall ovens do you have?
Number of Separate Ovens... \(\quad \square\)
B-3a [If OVEN>0] OVENFUEL What fuel does your [If OVEN>1: most used] separate wall oven use? Is it . . .

Electricity, ............................................................................. 05
Natural gas from underground pipes, .................................... 01
Propane (bottled gas), or......................................................... 02
Some other fuel? (Specify__ ......................... 21

B-4 [If STOVEN>0 or OVEN>0] OVENUSE INTERVIEWER INSTRUCTION: SHOW CARD 6. Please look at Card 6. Which of the categories shown best describes how often the [If OVEN+STOVEN>1: most used] oven is used?

Three or more times a day............. 1
Two times a day ............................ 2
Once a day..................................... 3
A few times each week ..... 4
About once a week ..... 5
Less than once a week. ..... 6
Not used (if volunteered) ..... 0
B-4a [If STOVEN>0 or OVEN>0] OVENCLN Does the [If OVEN+STOVEN>1: most used] ovenhave a self-cleaning feature?
Yes. .....  1
No . ..... 0
B-4a1 [If OVENCLN=1] TYPECLN Does the self-cleaning oven clean continuously or do you have to manually start the cleaning cycle?
Cleans continuously .....  1
Manually start the cleaning cycle ..... 2
B-5 MICRO Is a microwave oven used by your household?
Yes ..... 1
No ..... 0
B-5a [If MICRO=1] AMTMICRO INTERVIEWER INSTRUCTION: SHOW CARD 7. Please look atCard 7. Which answer best describes how your household uses the microwave to prepare hotmeals and snacks?
Used to cook or reheat most meals and snacks ..... 1
Used to cook or reheat about half of meals and snacks ..... 2
Used to cook or reheat a few meals and snacks ..... 3
Used very little ..... 4
B-5b [If MICRO=1] DEFROST Does your household use the microwave for defrosting?
Yes ..... 1
No ..... 0
B-6 OUTGRILL Is an outdoor grill used by your household?
Yes ..... 1
No ..... 0
B-6a [If OUTGRILL=1] OUTGRILLFUEL What fuel does your outdoor grill use? Is it...
Natural gas from underground pipes, ..... 01
Propane (bottled gas) ..... 02
Charcoal, or ..... 30
Some other fuel? (Specify

\(\qquad\) ..... 21
B-7 TOPGRILL Is a built-in indoor grill used by your household?
\(\qquad\)
Yes1
No ..... 0
B-7a [If TOPGRILL=1] STGRILA What fuel does your built-in grill use? Is it...
Electricity ..... 05
Natural gas from underground pipes, ..... 01
Propane (bottled gas), or ..... 02
Some other fuel? (Specify ..... 21
B-8 TOASTER Is a toaster oven used by your household?
Yes. ..... 1
No ..... 0
B-9 NUMMEAL INTERVIEWER INSTRUCTION: SHOW CARD 6. Please look at Card 6. Which of thecategories shown best describes how often hot meals are cooked in your home?
Three or more times a day ..... 1
Two times a day ..... 2
Once a day ..... 3
A few times each week ..... 4
About once a week ..... 5
Less than once a week ..... 6
Doesn't cook/Never cooks (If volunteered) ..... 0
B-10 [If more than one fuel is used for cooking] FUELFOOD You mentioned that your household uses [ENTER THE NAMES OF FUELS USED FOR COOKING] to prepare hot meals. Which of these fuels is used most for cooking in your home?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Some other fuel (Specify

\(\qquad\) ..... 21
B-11 COFFEE Is a coffee maker used by your household?
Yes .....  .1
No ..... 0

\section*{Next I'm going to ask about some other appliances.}

B-12 NUMFRIG How many refrigerators are plugged-in in your home?
Number of Refrigerators. \(\square\)

B-13 TYPERFR1 INTERVIEWER INSTRUCTION: SHOW CARD 8. Please look at Card 8. Which of the pictures best describes [If NUMFRIG \(=1\) your refrigerator?; If NUMFRIG>1 the refrigerator used the most?]
Full-size with one door ..... 01
Full-size with two doors, freezer next to the refrigerator ..... 21
Full-size with two doors, freezer above the refrigerator ..... 22
Full-size with two doors, freezer below the refrigerator ..... 23
Full-size with three or more doors ..... 05
Half-size or compact ..... 03
Some other kind ..... 04
B-13a SIZRFRI1 INTERVIEWER INSTRUCTION: SHOW CARD 9. Please look at Card 9. How would you describe the size of this refrigerator?
Small (14 cubic feet or less) ..... 2
Medium ( 15 to 18 cubic feet) ..... 3
Large (19 to 22 cubic feet) ..... 4
Very Large (more than 22 cubic feet) ..... 5
B-13b REFRIGT1 What type of defrosting does this refrigerator have? Is it .
Manual .....  .1
Frost-free? (either automatic or semi-automatic) ..... 2
No working freezer section (if volunteered) ..... 3
B-13c ICE Does this refrigerator have through-the-door ice and water service?
Yes ..... 1
No ..... 0
B-13d AGERFRI1 INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is this refrigerator? Your best estimate is fine.
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-13e [If AGERFRI1=01,02,03,DK] ESFRIG INTERVIEWER INSTRUCTION: SHOW CARD 41.Please look at Card 41. Is this refrigerator an Energy Star appliance?
Yes. ..... 1
No ..... 0
B-13f [If AGERFRI1=01 or (AGERFRI1=02 and OCCUPYY \(\neq 2009\), 2010)] REPLCFRI Your answers suggest you've replaced the refrigerator you use the most since your household moved in. Is that correct?
Yes ..... 1
No ..... 0
B-13g [If REPLCFRI=1] HELPFRI INTERVIEWER INSTRUCTION: SHOW CARD 10. Somehomeowners receive government or energy supplier assistance in paying for newrefrigerators. Please look at Card 10 . Which of the following, if any, helped pay for some orall of the cost of the new most frequently used refrigerator?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit .....  3
Subsidized loan ..... 4
Weatherization assistance ..... 5
B-13h [If HELPFRI>0] HELPFRIY In what year did you receive this assistance?
2006 ..... 1
2007 .....  2
2008 .....  3
2009 ..... 4
INTERVIEWER INSTRUCTION: IF NUMFRIG<2, GO TO QUESTION B-16. OTHERWISE, READ: Now I would like to ask you the same questions about the [If NUMFRIG=2: other; If NUMFRIG>2: second most-used] refrigerator.
B-14 TYPERFR2 INTERVIEWER INSTRUCTION: SHOW CARD 8. Please look at Card 8. Which of the pictures best describes this second refrigerator?
Full-size with one door ..... 01
Full-size with two doors, freezer next to the refrigerator ..... 21
Full-size with two doors, freezer above the refrigerator ..... 22
Full-size with two doors, freezer below the refrigerator ..... 23
Full-size with three or more doors ..... 05
Half-size or compact ..... 03
Some other kind ..... 04
B-14a SIZRFRI2 INTERVIEWER INSTRUCTION: SHOW CARD 9. Please look at Card 9. How would you describe the size of this refrigerator?
Small (14 cubic feet or less) ..... 2
Medium ( 15 to 18 cubic feet) ..... 3
Large (19 to 22 cubic feet) ..... 4
Very Large (more than 22 cubic feet) ..... 5
B-14b REFRIGT2 What type of defrosting does this refrigerator have? Is it...
Manual or ..... 1
Frost-free? (either automatic or semi-automatic) ..... 2
No working freezer section (if volunteered) ..... 3
B-14c MONRFRI2 During 2009, how many months was this refrigerator plugged in?
Number of months \(\square\)B-14d AGERFRI2 INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. Abouthow old is this refrigerator? Your best estimate is fine.
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-14e [If AGERFRI2 \(=01,02,03\), DK] ESFRIG2 INTERVIEWER INSTRUCTION: SHOW CARD 41. Please look at Card 41. Is this refrigerator an Energy Star appliance?
Yes. .....  1
No ..... 0
INTERVIEWER INSTRUCTION: IF NUMFRIG<3 GO TO QUESTION B-16. OTHERWISE, READ THISINTRODUCTION: Now I would like to ask you the same questions about your third most used refrigerator.
B-15 TYPERFR3 INTERVIEWER INSTRUCTION: SHOW CARD 8. Please look at Card 8. Which of the pictures best describes this third refrigerator?
Full-size with one door ..... 01
Full-size with two doors, freezer next to the refrigerator ..... 21
Full-size with two doors, freezer above the refrigerator ..... 22
Full-size with two doors, freezer below the refrigerator ..... 23
Full-size with three or more doors ..... 05
Half-size or compact ..... 03
Some other kind ..... 04
B-15a SIZRFRI3 INTERVIEWER INSTRUCTION: SHOW CARD 9. Please look at Card 9. How would you describe the size of this refrigerator?
Small (14 cubic feet or less) ..... 2
Medium ( 15 to 18 cubic feet) ..... 3
Large (19 to 22 cubic feet) ..... 4
Very Large (more than 22 cubic feet) ..... 5
B-15b REFRIGT3 What type of defrosting does this refrigerator have? Is it .
Manual or.1
Frost-free? (either automatic or semi-automatic) ..... 2
No working freezer section (if volunteered) ..... 3
B-15c MONRFRI3 During 2009, how many months was this refrigerator plugged in?
Number of months
\(\square\)
B-15d AGERFRI3 INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is this refrigerator?
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old. ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-15e [If AGERFRI3 = 01,02,03,DK] ESFRIG3 INTERVIEWER INSTRUCTION: SHOW CARD 41. Please look at Card 41. Is this refrigerator an Energy Star appliance?
Yes ..... 1
No ..... 0
B-16 SEPFREEZ Does your household use a separate freezer that is not part of a refrigerator?
Yes ..... 1
No. ..... 0
B-16a [If SEPFREEZ=1] NUMFREEZ How many separate freezers are used in your home?
One .....  1
Two ..... 2
Three or more ..... 3
INTERVIEWER INSTRUCTION: IF SEPFREEZ=1, READ THIS INTRODUCTION: Now I would like to ask some questions about the separate freezer that is used the most.
B-17 UPRTFRZR What model freezer is this? Is it . . . .
An upright or (vertical cabinet with a door on the front) ..... 1
A chest-type? (horizontal cabinet with the door on the top) ..... 2
INTERVIEWER INSTRUCTION: IF NECESSARY, EXPLAIN THAT AN UPRIGHTFREEZER IS A VERTICAL CABINET WITH A DOOR ON THE FRONT AND THAT ACHEST TYPE FREEZER IS A HORIZONTAL CABINET WITH THE DOOR ON THE TOP.
B-17a SIZFREEZ INTERVIEWER INSTRUCTION: SHOW CARD 11. Please look at Card 11. How would you describe the size of this freezer?
Small (14 cubic feet or less) ..... 1
Medium (15 to 18 cubic feet) ..... 2
Large (19 cubic feet or more) ..... 3
B-17b FREEZER What type of defrosting does this freezer have? Is it . . .Manual or .1
Frost-free? (either automatic or semi-automatic) ..... 2
B-17c AGEFRZR INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is this freezer?
Less than 2 years old ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old. ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-17d [[If AGEFRZR=01 or (AGEFRZR=02 and OCCUPYY \(\neq 2009,2010\) )]] REPLCFRZ Your
answers suggest you've replaced the freezer you use the most since your household moved in. Is that correct?
\[
\begin{aligned}
& \text { Yes .............................................................................................. } \\
& \text { No ........ }
\end{aligned}
\]
B-17e [If REPLCFRZ=1] HELPFRZ INTERVIEWER INSTRUCTION: SHOW CARD 12. Somehomeowners receive government or energy supplier assistance in paying for new freezers.Please look at Card 12. Which of the following, if any, helped pay for some or all of the costof the new most frequently used freezer?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
B-17f [If HELPFRZ>0] HELPFRZY In what year did you receive this assistance?
2006 ..... 1
2007 .....  2
2008 .....  3
2009 ..... 4
INTERVIEWER INSTRUCTION: IF NUMFREEZ<2 GO TO QUESTION B-19. OTHERWISE, READ: Now Iwould like to ask you the same questions about the second [If NUMFRIG>2: most used] freezer.
B-18 UPRTFRZR2 What model freezer is this? Is it . . . .
An upright or (vertical cabinet with a door on the front) ..... 1
A chest-type? (horizontal cabinet with the door on the top) ..... 2
INTERVIEWER INSTRUCTION: IF NECESSARY, EXPLAIN THAT AN UPRIGHTFREEZER IS A VERTICAL CABINET WITH A DOOR ON THE FRONT AND THAT ACHEST TYPE FREEZER IS A HORIZONTAL CABINET WITH THE DOOR ON THE TOP.
B-18a SIZFREEZ2 INTERVIEWER INSTRUCTION: SHOW CARD 11. Please look at Card 11. How would you describe the size of this freezer?
Small (14 cubic feet or less) ..... 1
Medium (15 to 18 cubic feet) ..... 2
Large (19 cubic feet or more) ..... 3
B-18b FREEZER2 What type of defrosting does this freezer have? Is it . .Manual or.1
Frost-free? (either automatic or semi-automatic) ..... 2
B-18c AGEFRZR2 INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is this freezer?
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old. ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-19 DISHWASH Is an automatic dishwasher used by your household?
Yes ..... 1
No. ..... 0
B-19a [If DISHWASH=1] DWASHUSE INTERVIEWER INSTRUCTION: SHOW CARD 13. Pleaselook at Card 13. Which category best describes how often your dishwasher is used?
At least once each day ..... 30
4 to 6 times a week ..... 20
2 or 3 times a week ..... 13
Once each week ..... 12
Less than once each week ..... 11
B-19b AGEDW INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is your dishwasher? Your best estimate is fine.
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
B-19b1 [If AGEDW=01,02,03,DK] ESDISHW INTERVIEWER INSTRUCTION: SHOWCARD 41. Please look at Card 41. Is your dishwasher an Energy Star appliance?
Yes ..... 1
No ..... 0
B-19c [If AGEDW=01 or (AGEDW=02 and OCCUPYY \(\neq 2009\), 2010) REPLCDW Your answerssuggest you've replaced the dishwasher in your home since your household moved in. Is thatcorrect?
Yes ..... 1
No ..... 0B-19d [If REPLCDW=1] HELPDW INTERVIEWER INSTRUCTION: SHOW CARD 12. Somehomeowners receive government or energy supplier assistance in paying for newdishwashers. Please look at Card 12. Which of the following, if any, helped pay for some orall of the cost of the new dishwasher?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
B-19e [If HELPDW>0] HELPDWY In what year did you receive this assistance?

2006
 .1

2007 .............................................. 2
2008 ............................................... 3
2009 .............................................. 4

B-20 IVCOMMB INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE KITCHEN APPLIANCES IN THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENTS ANSWERS. COMMENTS ARE NOT REQUIRED BUT ARE ENCOURAGED TO DESCRIBE UNIQUE HOUSING UNIT OR HOUSEHOLD CHARACTERISTICS. USE THIS SPACE TO HELP EXPLAIN EXTRAORDINARY OR ABNORMAL RESPONSES.

\section*{Section C: HOME APPLIANCES AND ELECTRONICS}

Now I have some questions about the use of other appliances and electronic devices in your home.

C-1 CWASHER Is a clothes washing machine used in your home? INTERVIEWER INSTRUCTION: IF LOOKLIKE=2 or TYPEHUQ=5 READ THE FOLLOWING: Do not include community clothes washers that are located in the basement or laundry room of your apartment building.

Yes ................................................. 1
No .0

C-1a [If CWASHER=1] TOPFRONT Is your washing machine one that you load from the top or one that you load from the front?

Top loading.................................... 1
Front loading.................................. 2
C-1b [If CWASHER=1] WASHLOAD INTERVIEWER INSTRUCTION: SHOW CARD 14. Please look at Card 14. In an average week, how many loads of laundry are washed in your clothes washer?

1 load or less each week ............................. 1
2 to 4 loads each week ................................ 2
5 to 9 loads each week ................................. 3
10 to 15 loads each week ............................. 4
More than 15 loads each week.................... 5
C-1c [If CWASHER=1] WASHTEMP What water temperature setting is usually used for the wash cycle of your clothes washer? Is it hot, warm, or cold water?

Hot
1
Warm ............................................. 2
Cold ............................................... 3
C-1d [If CWASHER=1] RNSETEMP What water temperature setting is usually used for the rinse cycle of your clothes washer? Is it hot, warm, or cold water?

Hot .1
Warm ............................................. 2
Cold .............................................. 3
C-1e [If CWASHER=1] AGECWASH INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is your clothes washer? Your best estimate is fine.

Less than 2 years old.................................. 01
2 to 4 years old ......................................... 02
5 to 9 years old .......................................... 03
10 to 14 years old...................................... 41
15 to 19 years old...................................... 42
20 years or older ........................................ 05
As old as the home (if volunteered).......... 06
C-1e1 [If AGECWASH=01,02,03,DK] ESCWASH INTERVIEWER INSTRUCTION: SHOW

CARD 41. Please look at Card 41. Is your clothes washer an Energy Star appliance?
Yes................................................. 1
No................................................. 0
C-1f [If AGECWASH=01 or (AGECWASH=02 and OCCUPYY \(\neq 2009,2010\) )] REPLCCW Your answers suggest you've replaced the clothes washer in your home since your household moved in. Is that correct?

Yes..................................................... 1
No .0

C-1g [If REPLCCW=1] HELPCW INTERVIEWER INSTRUCTION: SHOW CARD 12. Some homeowners receive government or energy supplier assistance in paying for new clothes washers. Please look at Card 12. Which of the following, if any, helped pay for some or all of the cost of the new clothes washer?

Did not receive any assistance .................... 0
Manufacturer or retailer rebate .................... 1
Utility or energy supplier rebate .................. 2
Tax credit.................................................... 3
Subsidized loan............................................ 4
C-1h [If HELPCW>0] HELPCWY In what year did you receive this assistance?
2006 ............................................... 1
2007 ............................................... 2
2008 .............................................. 3
2009 .............................................. 4

C-2 DRYER Do you use a clothes dryer in your home? INTERVIEWER INSTRUCTION: IF LOOKLIKE=2 or TYPEHUQ=5 READ THE FOLLOWING: Do not include community clothes dryers that are located in the basement or laundry room of your apartment building.

Yes ...........................................................................................
C-2a [If DRYER=1] DRYRFUEL What fuel does your clothes dryer use? Is it...
Electricity, .05

Natural gas from underground pipes, or ....................... 01
Propane (bottled gas)? ............................................. 02
C-2b [If DRYER=1] DRYRUSE INTERVIEWER INSTRUCTION: SHOW CARD 15. Please look at Card 15. Which category best describes how often your clothes dryer is used?

Use it every time you wash clothes.
.1
Use it for some, but not all, loads of wash.................. 2
Use it infrequently ..................................................... 3
C-2c [If DRYER=1] AGECDRYER INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. About how old is your clothes dryer? Your best estimate is fine.
Less than 2 years old. ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old. ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
C-3 TVCOLOR How many televisions are plugged-in in your home?
Number of televisions

\(\qquad\)

\(\square\)
C-4a [If TVCOLOR \(>0\) ] TVSIZE1] What is the size of your [If TVCOLOR \(>1\) : most used] television? Is it..
20 inches or less ..... 1
Between 21 and 36 inches ..... 2
37 inches or more ..... 3
C-4b [If TVCOLOR>0] TVTYPE1 INTERVIEWER INSTRUCTION: SHOW CARD 16. Please look at Card16. What type of display does your [If TVCOLOR \(>1\) : most used] television have?
Standard Tube .....  1
Flat Screen LCD .....  2
Flat Screen Plasma .....  3
Projection ..... 4
C-4c [If TVCOLOR>0] CABLESAT1] Is your [If TVCOLOR>1: most used] television connected to a cablebox, a satellite box, or neither?
Cable box ..... 1
Satellite box ..... 2
Neither ..... 0
C-4d [If CABLESAT1>0] COMBODVR1 Does this [If CABLESAT1=1: cable; If CABLESAT1=2: satellite]box have a DVR built in?
Yes1
No. ..... 0
C-4e [If CABLESAT1 \(=0\) or COMBODVR1=0] DVR1 Is your [If TVCOLOR \(>1\) : most used] televisionconnected to a DVR [If CABLESAT1=1: separate from the cable box; If CABLESAT1=2: separate fromthe satellite box]?
Yes ..... 1
No. ..... 0
C-4f [If TVCOLOR>0] INTERVIEWER INSTRUCTION: SHOW CARD 17. Please look at Card 17. Whatother types of devices are connected to your [If TVCOLOR>1: most used] television? (Mark all thatapply.)
DIGITSTB1 Digital converter box ..................................................................... 1 ............ 0
PLAYSTA1 Video game console ..... 1. .....  0
COMBOVCRDVD1 Combo DVD/VCR ..... 1. .....  0
VCR1 VCR ..... 1. .....  0
DVD1 DVD player or recorder ..... 1. .....  0
TVAUDIOSYS1 Home theater system ..... 1. .....  0
OTHERSTB1 Other type of set top box ..... 1............ 0
C-4g [If TVCOLOR>0] TVONWD1 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look atCard 18. Thinking about this television's use on weekdays, how many hours is this television turnedon each day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours. ..... 4
More than 10 hours ..... 5
C-4h [If PLAYSTA1=1] TVONWDWATCH1 Of this time, how much is spent playing video games?
None. ..... 0
Little. ..... 4
Half ..... 3
Most ..... 2
All ..... 1
C-4i [If TVCOLOR>0] TVONWE1 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card18. Thinking about this television's use on weekends, how many hours is this television turned oneach day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours ..... 4
More than 10 hours ..... 5
C-4j [If TVCOLOR>0] TVONWEWATCH1 Of this time, how much is spent playing video games?
None. ..... 0
Little. ..... 4
Half ..... 3
Most ..... 2
All ..... 1
C-5a [If TVCOLOR \(>1]\) TVSIZE2 What is the size of the second most used television in your home?
20 inches or less ..... 1
Between 21 and 36 inches ..... 2
37 inches or more .....  3
C-5b [If TVCOLOR>1] TVTYPE2 INTERVIEWER INSTRUCTION: SHOW CARD 16. Please look at Card16. What type of display does the second most used television have?
Standard Tube ..... 1
Flat-screen LCD ..... 2
Flat-screen Plasma ..... 3
Projection ..... 4
C-5c [If TVCOLOR \(>1]\) CABLESAT2 Is this television connected to a cable box, a satellite box, or neither?
Cable box .....  1
Satellite box ..... 2
Neither ..... 0
C-5d [If CABLESAT2>0] COMBODVR2 Does this [If CABLESAT2=1: cable; If CABLESAT2=2: satellite] box have a DVR built in?
Yes ..... 1
No ..... 0
C-5e [If CABLESAT2=0 or COMBODVR2=0] DVR2 Is this television connected to a DVR [IfCABLESAT2=1: separate from the cable box; If CABLESAT2=2: separate from the satellite box]?
Yes. ..... 1
No. ..... 0
C-5f [If TVCOLOR>1] INTERVIEWER INSTRUCTION: SHOW CARD 17. Please look at Card 17. Whatother types of devices are connected to this television? (Mark all that apply.)
YES ..... NO
DIGITSTB1 Digital converter box .....  0
PLAYSTA1 Video game console .....  0
COMBOVCRDVD1 Combo DVD/VCR .....  0
VCR1 VCR .....  0
DVD1 DVD player or recorder .....  0
TVAUDIOSYS1 Home theater system .....  0
OTHERSTB1 Other type of set top box 1. .....  0
C-5g [If TVCOLOR>1] TVONWD2 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look atCard 18. Thinking about this television's use on weekdays, how many hours is this television turnedon each day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours ..... 4
More than 10 hours ..... 5
C-5h [If PLAYSTA2=1] TVONWDWATCH2 Of this time, how much is spent playing video games?
None. ..... 0
Little. ..... 4
Half. ..... 3
Most ..... 2
All .....  1
C-5 [If TVCOLOR \(>1\) 1] TVONWE2 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card18. Thinking about this television's use on weekends, how many hours is this television turned oneach day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours .....  3
6 to 10 hours .....  .4
More than 10 hours ..... 5
C-5j [If PLAYSTA2 \(=1]\) TVONWEWATCH2 Of this time, how much is spent playing video games?
None. ..... 0
Little. ..... 4
Half .....  3
Most. ..... 2
All ..... 1
C-6a [If TVCOLOR \(>2\) 2] TVSIZE3 What is the size of the third most used television in your home?
20 inches or less ..... 1
Between 21 and 36 inches ..... 2
37 inches or more ..... 3
C-6b [If TVCOLOR>2] TVTYPE3 INTERVIEWER INSTRUCTION: SHOW CARD 16. Please look at Card16. Please look at Card XX. What type of display does the third most used television have?
Standard tube ..... 1
Flat-Screen LCD ..... 2
Flat-Screen Plasma .....  3
Projection ..... 4
C-6c [If TVCOLOR \(>2\) 2] CABLESAT3] Is this television connected to a cable box, a satellite box, or neither?
Cable box ..... 1
Satellite box .....  2
Neither .....  0
C-6d [If CABLESAT3>0] COMBODVR3 Does this [If CABLESAT3=1: cable; If CABLESAT3=2: satellite]box have a DVR built in?
Yes ..... 1
No. ..... 0
C-6e [If CABLESAT3=0 or COMBODVR3=0] DVR3 Is this television connected to a DVR [If CABLESAT3 = 1: separate from the cable box; If CABLESAT3=2: separate from the satellite box]?
Yes ..... 1
No. ..... 0
C-6f [If TVCOLOR>2] INTERVIEWER INSTRUCTION: SHOW CARD 17. Please look at Card 17. What other types of devices are connected to this television? (Mark all that apply.)
\begin{tabular}{|c|c|}
\hline & YES NO \\
\hline DIGITSTB3 Digital converter box & 1........... 0 \\
\hline PLAYSTA3 Video game console & 1........... 0 \\
\hline COMBOVCRDVD3 Combo DVD/VCR & . \(1 . .\). ....... 0 \\
\hline VCR3 VCR & 1........... 0 \\
\hline
\end{tabular}
DVD3 DVD player or recorder

\(\qquad\)
1. .....  0
TVAUDIOSYS3 Home theater system ..... 1. .....  0
OTHERSTB3 Other type of set top box ..... 1............. 0
C-6g [If TVCOLOR > 2] TVONWD3 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at
Card 18. Thinking about this television's use on weekdays, how many hours is this television turned on each day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours. ..... 4
More than 10 hours ..... 5
C-6h [If PLAYSTA2=1] TVONWDWATCH3 Of this time, how much is spent playing video games?
None. .....  0
Little. ..... 4
Half ..... 3
Most. ..... 2
All .....  1
C-6i [If TVCOLOR>2] TVONWE3 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card18. Thinking about this television's use on weekends, how many hours is this television turned oneach day? Include the time it is on even if no one is actually watching it.
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours ..... 4
More than 10 hours ..... 5
C-6j [If PLAYSTA2=1] TVONWEWATCH3 Of this time, how much is spent playing video games?
None. ..... 0
Little. ..... 4
Half ..... 3
Most ..... 2
All ..... 1
C-7 COMPUTER INTERVIEWER INSTRUCTION: SHOW CARD 19. Please look at Card 19. Does anyonein your household use a personal computer at home? Include both desktop and laptop personalcomputers.
Yes ..... 1
No. ..... 0
C-7a [If COMPUTER=1] NUMPC How many computers are used in your home?Number of computers
\(\qquad\)
\(\square\)
C-8a [If NUMPC \(>0\) ] PCTYPE1 INTERVIEWER INSTRUCTION: SHOW CARD 19. Please look at Card 19.Thinking about your [If NUMPC>1: most used] computer, is it a desktop model or a laptop or
netbook?
Desktop model .1
Laptop or netbook .2

\section*{C-8a1 [IF PCTYPE1=1] MONITOR1 INTERVIEWER INSTRUCTION: SHOW CARD 20. Please look at Card 20. Is this computer's monitor a flat-panel LCD?}
\[
\begin{aligned}
& \text { Yes (Flat-panel LCD) ............................................ } 1 \\
& \text { No (CRT)............... }
\end{aligned}
\]
C-8b [If NUMPC>0] TIMEON1 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card 18.Thinking about your [If NUMPC \(>1\) : most used] computer, how many hours each day is it used?
Less than 1 hour ..... 1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours. .....  4
More than 10 hours ..... 5
C-8c [If NUMPC \(>0]\) PCONOFF1 When this computer is not in use is the power usually turned off?
Yes ..... 1
No.. ..... 0
C-8c1 [IF PCONOFF1=0] PCSLEEP1 When this computer is not in use does it go into a sleep or standby mode?
Yes ..... 1
No ..... 0
C-9a [If NUMPC>1] PCTYPE2 INTERVIEWER INSTRUCTION: SHOW CARD 19. Please look at Card 19.Thinking about the second most used computer, is it a desktop model or a laptop or netbook?
Desktop model ..... 1
Laptop or netbook ..... 2
C-9a1 [IF PCTYPE2=1] MONITOR2 INTERVIEWER INSTRUCTION: SHOW CARD 20. Please look at Card 20. Is this computer's monitor a flat-panel LCD?
Yes (Flat-panel LCD) .....  1
No (CRT) ..... 0
C-9b [If NUMPC>1] TIMEON2 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card 18Thinking about the second most used computer, how many hours each day is it used?
Less than 1 hour .....  1
1 to 3 hours .....  2
3 to 6 hours ..... 3
6 to 10 hours. ..... 4
More than 10 hours ..... 5
C-9c [If NUMPC \(>1\) ] PCONOFF2 When this computer is not in use is the power usually turned off?
Yes ..... 1No.0
C-9c1 [IF PCONOFF2=0] PCSLEEP2 When this computer is not in use does it go into a sleep or standby mode?
\[
\begin{aligned}
& \text { Yes ....................................................................................................... } \\
& \text { No ....... }
\end{aligned}
\]
C-10a [If NUMPC>2] PCTYPE3 INTERVIEWER INSTRUCTION: SHOW CARD 19. Please look at Card 19.Thinking about the third most used computer, is it a desktop model or a laptop or netbook?
Desktop model .....  1
Laptop or netbook ..... 2
C-10a1 [IF PCTYPE3=1] MONITOR3 INTERVIEWER INSTRUCTION: SHOW CARD 20. Please look at Card 20. Is this computer's monitor a flat-panel LCD?
Yes (Flat-panel LCD) ..... 1
No (CRT) ..... 0
C-10b [If NUMPC>2] TIMEON3 INTERVIEWER INSTRUCTION: SHOW CARD 18. Please look at Card 18.Thinking about the third most used computer, how many hours each day is it used?
Less than 1 hour .....  1
1 to 3 hours ..... 2
3 to 6 hours ..... 3
6 to 10 hours ..... 4
More than 10 hours ..... 5
C-10c [If NUMPC \(>2]\) PCONOFF3 When this computer is not in use is the power usually turned off?
Yes .....  1
No ..... 0
C-10c1 [IF PCONOFF3=0] PCSLEEP3 When this computer is not in use does it go into a sleep or standby mode?
Yes ..... 1
No ..... 0C-11 [If COMPUTER=1] INTERNET [IF NUMPC=1: Does the computer; If NUMPC \(>1\) : Do any of thecomputers] in your home have access to the Internet?
Yes ..... 1
No. .....  0
C-11a [IF INTERNET=1] What type of internet access is used in your home? Is it . . . (Mark all that apply.)
INDIALUP Dial-up (a phone line), ............................................................................... 0
INDSL DSL or Fiber Optic, ................................................................................... 1. .....  0
INCABLE Cable, or

\(\qquad\) .....  1. ..... 0
INSATEL Satellite? .....  1
Yes. ..... 1
No ..... 0
C-1 [If COMPUTER=1] PCPRINT How many printers are used in your home?Number of printers
\(\square\)
C-13 FAX Is a separate fax machine used in your home?
Yes ..... 1
No ..... 0
C-14 COPIER Is a separate photocopier used in your home?
Yes .....  1
No ..... 0
C-15 NOTMOIST Electric dehumidifiers remove moisture from the air and are often used in the summer.Is a dehumidifier used in your home?
Yes ..... 1
No ..... 0
C-15a [If NOTMOIST=1] USENOTMOIST In 2009, how many months was the dehumidifier used?
1 to 3 months ..... 1
4 to 6 months ..... 2
7 to 9 months ..... 3
10 to 11 months, but not all year, or is it ..... 4
Turned on all year long? ..... 5
C-16 MOISTURE Electric humidifiers add moisture to the air and are often used in the winter. Is ahumidifier used in your home?
Yes ..... 1
No ..... 0
C-16a [If MOISTURE=1] USEMOISTURE In 2009, how many months was the humidifier used?
1 to 3 months ..... 1
4 to 6 months, ..... 2
7 to 9 months ..... 3
10 to 11 months, but not all year, or is it ..... 4
Turned on all year long? ..... 5

For each of the following appliances please tell me, YES or NO, whether they are used in your home.
C-17a [If TYPEHUQ<4] WELLPUMP An electric pump for well water? \(\frac{\text { Yes }}{.1 \ldots \ldots . . . . . . . . . . . . . . . . . . . . ~} 0\)
C-17b DIPSTICK [If DSFLAG=1] Any automobile block heaters, dip-stick engine heaters, or battery blankets? ..... 1. ..... 0
C-17c SWAMPCOL [If SCFLAG=1] An evaporative or swamp cooler? ..... 1. ..... 0
C-17d AQUARIUM Any large heated aquariums of 20 gallons or more? ..... 1. ..... 0
C-17e STEREO Any stereo equipment? ..... 1. .....  0
C-17f NOCORD A portable cordless telephone (other than cell phones)? ..... 1. .....  0
\(\mathrm{C}-17 \mathrm{~g}\) ANSMACH A telephone answering machine? ..... 1. ..... 0
C-18a BATTOOLS How many rechargeable portable appliances or tools, such as handheld vacuum cleaners, flashlights, or power drills, do you have in your household?
0 . ..... 0
1 to 3 ..... 1
4 to 8 .....  2
More than 8 ..... 3
C-18a1 [If BATTOOLS \(>0\) ] BATCHRG When these portable appliances and tools are not being used do you keep them plugged in all the time, do you only recharge them as needed, or do you use both ways?
Keep them plugged in all the time ..... 1
Recharge them as needed ..... 2
Both ways are used ..... 3
C-18a2 [If BATCHRG>1] CHRGPLGT Are the chargers for these portable appliances and tools always plugged into the wall?
Yes ..... 1
No ..... 0
Some but not all ..... 2
C-18b ELECDEV How many rechargeable electronic devices, such as cell phones, portable music players,digital cameras, and electric shavers, do you have in your household?
0 ..... 0
1 to 3 .....  1
4 to 8 .....  2
More than 8 ..... 3
C-18b1 [If ELECDEV>0] ELECCHRG When these electronic devices are not being used do you keep them plugged in all the time, do you only recharge them as needed, or do you use both ways?
Keep them plugged in all the time .............. 1
Recharge them as needed ..... 2

Both ways are used
C-18b2 [If ELECCHRG>1] CHRGPLGE Are the chargers for these electronic devices always plugged into the wall?

Yes ................................................. 1
No ....................................... 0
Some but not all
Some but not all ............................. 2

C-19 IVCOMMC INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE OTHER APPLIANCES IN THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section D: SPACE HEATING}
Now I have some questions about heating your home.
D-1 HEATHOME Is your home heated during the winter?
Yes ..... 1
No. .....  0
D-2a [If HEATHOME=0] DNTHEAT You have just told me that you don't heat your home during thewinter. Just to clarify, is it that you have heating equipment but don't use it, or does your home justnot have any heating equipment?
Have equipment, but don't use it ..... 1
Don't have any heating equipment \(2 \rightarrow\) GO TO QUESTION E-1
D-2a1 [If DNTHEAT=1] EQUIPNOHEAT INTERVIEWER INSTRUCTION: SHOW CARD 21. Even though you don't heat your home, we are still interested to know the type of equipment you have. Please look at Card 21. What type of heating equipment do you have?
Heat pump ..... 04
Central furnace with ducts to individual rooms ..... 03
Steam/Hot water system with radiators or pipes in each room ..... 02
Built-in electric units in each room installed in walls, ceilings, baseboards, or floors ..... 05
Built-in floor/wall pipeless furnace ..... 06
Built-in room heater burning gas, oil, or kerosene. ..... 07
Heating stove burning wood, coal, or coke. ..... 08
Portable heaters ..... 10
Fireplace ..... 09
Some other equipment (Specify ..... 21
D-2a2 [If DNTHEAT=1] FUELNOHEAT INTERVIEWER INSTRUCTION: SHOW CARD 22. Please look at Card 22. What is the main fuel used for this heating equipment?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood ..... 07
Solar. ..... 08
District steam ..... 09
Some other fuel (Specify ..... 21
After respondent answers \(\rightarrow\) GO TO QUESTION E-1
D-3 [If HEATHOME=1] EQUIPM INTERVIEWER INSTRUCTION: SHOW CARD 21. Let's start with themain source of heating in your home. Please look at Card 21. Please tell me which type of heatingequipment provides most of the heat for your home.
Heat pump ..... 04
Central furnace with ducts to individual rooms ..... 03
Steam/Hot water system with radiators or pipes in each room ..... 02
Built-in electric units in each room installed in walls, ceilings, baseboards, or floors ..... 05
Built-in floor/wall pipeless furnace ..... 06
Built-in room heater burning gas, oil, or kerosene ..... 07
Heating stove burning wood, coal, or coke ..... 08
Portable heaters ..... 10
Fireplace ..... 09
Cooking stove used to heat your home as well as to cook ..... 12
Some other equipment (Specify ). ..... 21
D-4 [If HEATHOME=1] FUELHEAT INTERVIEWER INSTRUCTION: SHOW CARD 22. Please look at Card 22. What is the main fuel used for heating your home? That is, which fuel is the one that provides the most heat for your home?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood ..... 07
Solar ..... 08
District Steam. ..... 09
Some other fuel (Specify ..... 21
D-5a [If HEATHOME=1] MAINTHT In the last year, has any routine service or maintenance been performed on your household's heating equipment?
Yes ..... 1
No ..... 0
D-5b [If HEATHOME=1] EQUIPAGE INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look atCard 1. Approximately, how old is your household's [FILL: EQUIPM] main heating equipment?
Less than 2 years old ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
D-5c [If EQUIPAGE=01 or (EQUIPAGE=02 and OCCUPYY \(\neq 2009\), 2010)] REPLCHT Your answers suggestyou've replaced the main heating equipment in your home since your household moved in. Is thatcorrect?
Yes ..... 1
No. ..... 0
D-5d [If MAINTHT=1 or REPLCHT=1] HELPHT INTERVIEWER INSTRUCTION: SHOW CARD 10. Somehomeowners receive government or energy supplier assistance in paying for new heating equipment.Please look at Card 10. Which of the following, if any, helped pay for some or all of the cost of yourhousehold's new main heating equipment or for maintaining your household's current heatingequipment?
Did not receive any assistance 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
Weatherization assistance ..... 5
D-5e [If HELPHT>0] HELPHTY In what year did you receive this assistance?
2006 ..... 1
2007 ..... 2
2008 ..... 3
2009 ..... 4
D-6 [If HEATHOME=1] HEATOTH Does the main heating equipment for your home also heat any other apartments, condos, households, businesses, or farm buildings?
Yes ..... 1
No. ..... 0
D-7 [If HEATHOME=1] EQUIPAUX INTERVIEWER INSTRUCTION: SHOW CARD 23. You told me that [EQUIPM] is the main source of heat in your home. Please look at Card 23. In 2009, did you use any other types of heating equipment listed on Card 23? (Mark all that apply.)
NOOTHEQU No other equipment ..... 00
REVERSE Heat pump ..... 04
WARMAIR Central furnace with ducts to individual rooms ..... 03
STEAMR Steam/Hot water system with radiators or pipes in each room ..... 02
PERMELEC Built-in electric units in each room installed in walls, ceilings, baseboards, or floors ..... 05
PIPELESS Built-in floor/wall pipeless furnace ..... 06
ROOMHEAT Built-in room heater burning gas, oil, or kerosene ..... 07
WOODKILN Heating stove burning wood, coal, or coke. ..... 08
CARRY Portable heaters ..... 10
CHIMNEY Fireplace ..... 09
RANGE Cooking stove used to heat your home as well as to cook ..... 12
DIFEQUIP Some other equipment (Specify ..... 21
D-7a [If WARMAIR or STEAMR or DIFEQUIP=1] FURNFUEL RADFUEL DIFFUEL ELECAUX UGASAUX LPGAUX FOILAUX KEROAUX WOODAUX SOLARAUX OTHERAUX DKAUX What fuel does the [FILL: EQUIPAUX] use?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood ..... 07
Solar ..... 08
Some other fuel (Specify ..... 21D-7b [If PIPELESS=1] PIPEFUEL ELECAUX UGASAUX LPGAUX FOILAUX KEROAUXWOODAUX OTHERAUX DKAUX What fuel does the pipeless furnace use?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood ..... 07
Some other fuel (Specify ..... 21
D-7c [If ROOMHEAT =1] RMHTFUEL UGASAUX LPGAUX FOILAUX KEROAUX DKAUX
What fuel does the room heater use?
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil. ..... 03
Kerosene ..... 04
D-7d [If WOODKILN=1] HSFUEL WOODAUX OTHERAUX DKAUX What fuel does the heating stove use?
Wood07
Some other fuel (Specify ..... 21
D-7e [If CHIMNEY=1] FPFUEL UGASAUX LPGAUX WOODAUX OTHERAUX DKAUX What fuel does the fireplace use?
Wood ..... 07
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Some other fuel (Specify

\(\qquad\)
 ) ..... 21
D-7e1 [If FPFUEL=01,02] NGFPFLUE Does this fireplace have a flue to the outside or is it entirely self-contained?
Flue to the outside .1
Flueless (self-contained). ..... 2
D-7e2 [If FPFUEL=01,02] USENGFP This winter how frequently have you used your gas fireplace? Have you used it . . .
Most days, ..... 1
About once a week, or ..... 2
Fewer than 4 times each month? .....  3
D-7f [If RANGE \(=1]\) RNGFUEL ELECAUX UGASAUX LPGAUX FOILAUX KEROAUXWOODAUX OTHERAUX DKAUX What fuel does the cooking stove use?
Electricity ..... 05
Natural gas from underground pipes. ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood ..... 07
Some other fuel (Specify ..... 21

Now I would like to ask you some questions about the parts of your home that are heated. I'd like you to consider all the sources of heating in your home when answering these questions.

D-8 [If EQUIPAUX=1] EQMAMT You've told me that your household uses more than one type of equipment to heat your home. Thinking about your main heating equipment, the [FILL: EQUIPM] that uses [FILL: FUELHEAT], how much of the heat for your home would you say that this heating equipment provides...

Almost all,................................................... 1
About three-fourths, or................................. 2
Closer to half of all your heat? .................. 3

D-9 [If HEATHOME=1] HEATROOM Earlier, we determined that you have [FILL: TOTROOMS] total rooms in your home. How many of these rooms were heated this last winter?

Number of heated rooms... \(\square\)

D-10 [If HEATHOME \(=1\) and (EQUIPM \(<08\) or EQUIPM=21)] THERMAIN INTERVIEWER INSTRUCTION: SHOW CARD 24. Please look at Card 24. Do you have a thermostat that controls your main [FILL: EQUIPM] heating equipment?

INTERVIEWER INSTRUCTION: IF NEEDED, ADD: A thermostat is a small box that allows you to set a desired inside temperature and will turn the heat on and off as needed to maintain that temperature.
\(\qquad\)
\(\qquad\)

D-10a [If THERMAIN=1] OTHTHERM Do you have more than one thermostat that controls your heating?

Yes ................................................. 1
No .................................................. 0

D-10a1 [If OTHTHERM=1] NUMTHERM How many total thermostats do you have in your home?

Number of thermostats \(\qquad\)

D-10b [If THERMAIN=1] PROTHERM Some thermostats can be programmed so that different temperatures are automatically maintained at different times of the day such as setting a lower temperature at night or when no one is home. Is the thermostat that controls your main heating equipment programmable?
\(\qquad\)
D-10b1 [If PROTHERM=1] AUTOHEATNITE Is this thermostat usually programmed to automatically lower the heating temperature setting at night during sleeping hours?
\(\qquad\)
No
0

D-10b2 [If PROTHERM=1] AUTOHEATDAY Is this thermostat usually programmed to automatically lower the heating temperature setting during the day when no one is at home?
\(\qquad\)
No. 0

D-11 [If NUMTHERM>1] Earlier you reported having [FILL: NUMTHERM] thermostats. For the next questions, if the thermostats are set at different temperatures, only report for the thermostat that affects the rooms where most of the people are.

D-11a TEMPHOME Typically, what is the temperature when someone is inside your home during the day? [IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: CAN I JUST HAVE YOUR BEST ESTIMATE?]

Enter degrees Fahrenheit \(\square\)
D-11b TEMPGONE What is the temperature when no one is inside your home during the day? [IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: CAN I JUST HAVE YOUR BEST ESTIMATE?]

Enter degrees Fahrenheit \(\qquad\)
D-11c TEMPNITE What is the temperature inside your home at night? [IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: CAN I JUST HAVE YOUR BEST ESTIMATE?]

Enter degrees Fahrenheit


D-12 IVCOMMD INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE SPACE HEATING EQUIPMENT IN THIS HOUSING UNIT AND ITS' USAGE THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.
\(\qquad\)
\(\qquad\)
\(\qquad\)

\section*{Section E: WATER HEATING}

Next, I would like you to think about how water is heated in your home. There are two main types of water heating equipment-those that use tanks, and those that are tankless.

E-1 NUMH2OHTRS How many water heating tanks are used in your home?
Number of Water Heating Tanks \(\square\)
E-1a NUMH2ONOTNK How many tankless water heaters are used in your home?
Number of Tankless Water Heaters \(\square\)
\[
\begin{aligned}
& \rightarrow \text { If NUMH2OHTRS }=0 \text { AND } \\
& \text { NUMH2ONOTNK }=0 \text { GO TO SECTION F. }
\end{aligned}
\]

INTERVIEWER INSTRUCTION: IF (NUMH2OHTRS+NUMH2ONOTNK>1) READ THIS INTRODUCTION: First, I would like to ask some questions about the water heating equipment that provides most of the hot water used in your home.

E-2 \(\quad[\) If NUMH2OHTRS \(>0\) and \(N U M H 2 O N O T N K>0]\) MAINH2OTYPE Is the main water heating equipment a
water heating tank or a tankless water heater?
Water heating tank . .1
Tankless water heater ..................... 2
E-2a FUELH2O INTERVIEWER INSTRUCTION: SHOW CARD 25. Please look at Card 25. Which fuel does the main water heating equipment use?

Electricity.................................................. 05
Natural gas from underground pipes......... 01
Propane (bottled gas) ................................. 02
Fuel oil....................................................... 03
Kerosene .................................................... 04
Wood......................................................... 07
Solar........................................................... 08
Some other fuel (Specify ___ ........ 21
E-2b WHEATOTH Does the main water heating equipment for your home also heat water for any other apartments, condos, households, businesses, or farm buildings?

Yes ................................................. 1
No .................................................. 0
E-2c [If MAINH2OTYPE \(\neq 2]\) WHEATSIZ INTERVIEWER INSTRUCTION: SHOW CARD 26. Please look at Card 26. What is the approximate size of the main water heating tank?

Small (30 gallons or less)........................... 01
Medium (31 to 49 gallons)........................ 02
Large (50 gallons or more) ....................... 03
E-2d WHEATAGE INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. Approximately how old is the main water heating equipment?

Less than 2 years old................................. 01
2 to 4 years old........................................... 02
5 to 9 years old.......................................... 03
10 to 14 years old...................................... 41
15 to 19 years old....................................... 42
20 years or older ........................................ 05
As old as the home (if volunteered) .......... 06
E-2e WHEATBKT Has the main water heater in your home been insulated using a water heater blanket?
Yes ..... 1
No ..... 0
E-2f [If WHEATBKT=1] HELPWH INTERVIEWER INSTRUCTION: SHOW CARD 10. Some homeownersreceive government or energy supplier assistance in paying for water heater insulation. Please look atCard 10. Which of the following, if any, helped pay for some or all of the cost of the water heaterblanket or insulation?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
Weatherization assistance ..... 5
E-2g [If HELPWH>0] HELPWHY In what year did you receive this assistance?
2006 ..... 1
2007 ..... 2
2008 ..... 3
2009 ..... 4
Prior to 2006 ..... 5
E-3 [If (NUMH2OHTRS \(>1\) and NUMH2ONOTNK \(>0\) ) or (NUMH2OHTRS \(>0\) and NUMH2ONOTNK \(>1\) )]
H2OTYPE2 Is the secondary water heating equipment a water heating tank or a tankless water heater?
Water heating tank1
Tankless water heater ..... 2
E-3a [If NUMH2OHTRS+NUMH2ONOTNK>1] FUELH2O2 INTERVIEWER INSTRUCTION: SHOW CARD 25. Please look at Card 25. Which fuel does your home's secondary water heating equipment use to heat water?
Electricity ..... 05
Natural gas from underground pipes ..... 01
Propane (bottled gas) ..... 02
Fuel oil ..... 03
Kerosene ..... 04
Wood. ..... 07
Solar. ..... 08
Some other fuel (Specify ..... 21
E-3b [If H2OTYPE2 \(\neq 2]\) WHEATSIZ2 INTERVIEWER INSTRUCTION: SHOW CARD 26. Please look at
Card 26. What is the approximate size of the secondary water heater tank?
Small (30 gallons or less) ..... 01
Medium (31 to 49 gallons) ..... 02
Large ( 50 gallons or more) ..... 03
E-3c [If NUMH2OHTRS+NUMH2ONOTNK \(>1\) ] WHEATAGE2 INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. Approximately how old is the secondary water heating equipment?
Less than 2 years old ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06

E-4 IVCOMME INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE WATER HEATING EQUIPMENT IN THIS HOUSING UNIT AND ITS' USAGE THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section F: AIR CONDITIONING}

F-1 AIRCOND Is any air conditioning equipment used in your home?
\(\qquad\)
Yes .1

No. . 0

F-2 [If AIRCOND \(=0\) ] DNTAC Just to clarify, do you have air conditioning equipment but don't use it, or does your home just not have any air conditioning equipment?

Have equipment, but don't use it. .. 1

Don't have any air conditioning equipment \(2 \rightarrow\) GO TO QUESTION F-13

F-2a [If DNTAC=1] COOLTYPENOAC INTERVIEWER INSTRUCTION: SHOW CARD 27. We are still interested to know about the air conditioning equipment in your home. Please look at Card 27. What type of air conditioning equipment does your home have? Is it...

A central system,
Individual units in the windows or wall, or.............. 2
Both a central system and individual units?.............. 3
After respondent answers, GO TO QUESTION F-14.

F-3 [If AIRCOND=1] COOLTYPE INTERVIEWER INSTRUCTION: SHOW CARD 27. Please look at Card 27. What type of air conditioning equipment does your home have? Is it...

A central system,
Individual units in the windows or wall, or................. 2
Both a central system and individual units? ................. 3
F-3a [If COOLTYPE \(=1,3\) and EQUIPM \(\neq 03,04]\) DUCTS Central air conditioning requires that the system have ducts to carry the cooled air to the individual rooms. These ducts may also carry warm air for space heating. Does your home have ducts like these?
\[
\begin{aligned}
& \text { Yes .................................................................................................... } \\
& \text { No ....... }
\end{aligned}
\]

F-4 [If COOLTYPE \(=1,3]\) CENACHP Is your central air conditioning system a heat pump?
Yes ................................................. 1
No.................................................. 0

F-5 [If COOLTYPE=1,3] ACOTHERS Does the central air conditioning equipment that cools your home also cool any other apartments, condos, households, businesses, or farm buildings?

Yes ............................................... 1
No.

F-6a [If COOLTYPE=1,3] MAINTAC In the last year, has any routine service or maintenance been performed on your household's central air conditioning equipment?

Yes ..........................................................................................
No......
F-6b [If COOLTYPE=1,3] AGECENAC INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. Approximately, how old is your central air conditioning equipment?
Less than 2 years old ..... 01
2 to 4 years old ..... 02
5 to 9 years old ..... 03
10 to 14 years old ..... 41
15 to 19 years old ..... 42
20 years or older ..... 05
As old as the home (if volunteered) ..... 06
F-6c

[If AGECENAC \(=01\) or (AGECENAC \(=02\) and OCCUPYY \(\neq 2009\), 2010)] REPLCCAC Your answers suggest you've replaced the central air conditioning equipment in your home since your household moved in. Is that correct?
Yes ..... 1
No. ..... 0
F-6d [If MAINTAC=1 or REPLCCAC=1] HELPCAC INTERVIEWER INSTRUCTION: SHOW CARD 10. Somehomeowners receive government or energy supplier assistance in paying for new air conditioning equipment.Please look at Card 10. Which of the following, if any, helped pay for some or all of the cost of yourhousehold's new air conditioning equipment or for maintaining your household's current air conditioningequipment?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
Weatherization assistance ..... 5
F-6e [If HELPCAC>0] HELPCACY In what year did you receive this assistance?
2006. ..... 1
2007 .....  2
2008 ..... 3
2009 ..... 4
F-7 [If COOLTYPE=1,3] USECENAC INTERVIEWER INSTRUCTION: SHOW CARD 28. Please look at Card 28. Which of the statements shown best describes the way your central air conditioning system was used last summer?
Turned on only a few days or nights when really needed ............... 1
Turned on quite a bit ....................................................................... 2
Turned on just about all summer..................................................... 3
F-8 [If COOLTYPE=1,3] ACROOMS Of the [FILL: TOTROOMS] total rooms in your home, how many were cooled by your central air conditioning system last summer?
Enter the number \(\qquad\)
F-9 [If COOLTYPE=1,3] THERMAINAC INTERVIEWER INSTRUCTION: SHOW CARD 24. Please look at Card 24. Do you have a thermostat that controls your central air conditioning equipment?
INTERVIEWER INSTRUCTION: IF NEEDED, ADD: A thermostat is a small box that allows you to set a desired inside temperature and will turn the heat on and off as needed to maintain that temperature.
Yes ................................................. 1
No.
F-9a [If THERMAINAC=1] PROTHERMAC Some thermostats can be programmed so that different temperatures are automatically maintained at different times of the day such as setting a higher temperature at night or when no one is home. Is the thermostat that controls your central air conditioning equipment programmable?

Yes ................................................. 1
No

F-9a1 [If PROTHERMAC=1] AUTOCOOLNITE Is this thermostat programmed to automatically adjust the cooling temperature setting at night during sleeping hours?
```

Yes1

```
\(\qquad\)

F-9a2 [If PROTHERMAC=1] AUTOCOOLDAY Is this thermostat programmed to automatically adjust the cooling temperature setting during the day when no one is at home?
\(\qquad\)
Yes 0

F-10 [USECENAC=2,3] Now I would like you to think about the temperature inside your home when using your central air conditioning equipment last summer. [If NUMTHERM \(>1\) : Earlier you reported having [FILL: NUMTHERM] thermostats. For the next questions, if the thermostats are set at different temperatures, only report for the thermostat that affects the rooms where most of the people are.]

F-10a TEMPHOMEAC Typically, what is the temperature when someone is inside your home during the day? IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: WHAT'S YOUR BEST ESTIMATE?

Enter degrees Fahrenheit \(\qquad\)
Air-conditioner Turned Off 95

F-10b TEMPGONEAC What is the temperature when no one is inside your home during the day? IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: WHAT'S YOUR BEST ESTIMATE?

Enter degrees Fahrenheit \(\qquad\)


Air-conditioner Turned Off 95

F-10c TEMPNITEAC What is the temperature inside your home at night? IF NO ANSWER, PROBE 1: THEN AT WHAT TEMPERATURE IS THE THERMOSTAT SET? PROBE 2: WHAT'S YOUR BEST ESTIMATE?

Enter degrees Fahrenheit \(\qquad\)
Air-conditioner Turned Off 95

F-11 [If COOLTYPE=2,3] NUMBERAC How many window or wall air conditioning units do you use in your home?
Enter the number \(\qquad\)
\(\square\)

F-12a [If COOLTYPE=2,3] WWACAGE INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. Approximately, how old is the [If NUMERAC>1: most-used] window or wall air conditioning unit in your home?

moved in. Is that correct?
Yes .............................................. 1
No................................................ 0
F-12c [If REPLCWWAC=1] HELPWWAC INTERVIEWER INSTRUCTION: SHOW CARD 10. Some homeowners receive government or energy supplier assistance in paying for new air conditioning units. Please look at Card 10. Which of the following, if any, helped pay for some or all of the cost of your new wall or window air conditioning unit?

Did not receive any assistance .................... 0
Manufacturer or retailer rebate..................... 1
Utility or energy supplier rebate.................. 2
Tax credit ..................................................... 3
Subsidized loan ............................................ 4
Weatherization assistance ............................ 5
F-12d [If HELPWWAC \(>0\) ] HELPWWACY In what year did you receive this assistance?
2006.............................................. 1
2007............................................... 2
2008............................................... 3
2009................................................ 4

F-12e [If WWACAGE=01,02,03,DK] ESWWAC INTERVIEWER INSTRUCTION: SHOW CARD 41. Please look at Card 41. Is this air conditioning unit an Energy Star appliance?

Yes ................................................. 1
No................................................... 0
F-12f [If COOLTYPE=2,3] USEWWAC INTERVIEWER INSTRUCTION: SHOW CARD 28. Please look at Card 28. Which of the statements shown best describes the way your household used the [If NUMBERAC \(>1\) : most used] window/wall air conditioning unit last summer?

Turned on only a few days or nights when really needed ............... 1
Turned on quite a bit ....................................................................... 2
Turned on just about all summer...................................................... 3

F-13 NUMCFAN How many ceiling fans does your household use?
Number of ceiling fans


F-13a [If NUMCFAN>0] USECFAN Thinking about the ceiling fan [If NUMCFAN>1: that you use the most], how often was this fan used last summer? Is it . . .

Used only a few days or nights, when it's really needed, ...................... 1
Used quite a bit, or................................................................................. 2
Used just about all summer? .................................................................. 3
Not used at all .......................................................................................... 4

F-14 TREESHAD Do any large trees shade your home from the afternoon summer sun?
Yes ................................................ 1
No................................................... 0
\(\begin{array}{ll}\text { F-15 } & \text { IVCOMMF INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE AIR- } \\ \text { CONDITIONING EQUIPMENT IN THIS HOUSING UNIT AND ITS' USAGE THAT MIGHT PROVIDE } \\ & \text { CLARIFICATION TO THE RESPONDENT'S ANSWERS. }\end{array}\)

\section*{Section G: MISCELLANEOUS}

Now let's turn to some other uses of energy in your home and talk about some characteristics of your home that may affect energy consumption.

G-1 [If TYPEHUQ \(\neq 1]\) HIGHCEIL Most ceilings are about 8 feet high which is about a foot higher than a standard
 door. Are any of the ceilings in your home unusually high?

\(\qquad\)

No.
 .0

G-1a [If HIGHCEIL=1] CATHCEIL Are any of the ceilings in your home cathedral ceilings? Cathedral
 ceilings are usually in rooms on the main floor and go all the way up to the roof.

Yes .............................................................................................

G-2 [If TYPEHUQ \(=2,3]\) SWIMPOOL Does your home have its own swimming pool with a filtering system?
Yes ................................................ 1
No. .0

G-2a [If SWIMPOOL=1] POOL Is it a heated pool?
Yes ................................................ 1
No ................................................. 0
G-2a1 [If POOL=1] FUELPOOL What fuel is used most often to heat the pool water?
Electricity ................................................................. 05
Natural gas from under ground pipes ....................... 01
Propane (bottled gas) ................................................ 02
Fuel oil..................................................................... 03
Kerosene .................................................................... 04
Solar......................................................................... 08
Other (Specify ___) .................................... 21

G-3 [If TYPEHUQ=1,2,3] RECBATH Does your home have a heated hot tub, spa, or Jacuzzi, other than a bathtub?

Yes ................................................ 1
No. 0

G-3a [If RECBATH=1] FUELTUB What fuel is used most often to heat the water in your hot tub, spa, or Jacuzzi?
\[
\text { Electricity.................................................................. } 05
\]
Natural gas from under ground pipes. ..... 01
Propane (bottled gas) ..... 02
Fuel oil. ..... 03
Kerosene ..... 04
Solar. ..... 08
Other (Specify ..... 21

G-4a LGT12 Thinking of a typical summer weekday, how many indoor lights does your household have turned on for more than \(\mathbf{1 2}\) hours? Do not include any nightlights in your count.

Enter the number \(\qquad\)

G-4a1 [If LGT12>0] LGT12EE How many of these lights use energy-efficient bulbs, such as compact fluorescent (CFL) bulbs?

Enter the number.


G-4b LGT4 How many indoor lights are turned on between 4 hours and 12 hours during a typical summer weekday?

Enter the number. \(\square\)
G-4b1 [If LGT4>0] LGT4EE How many of these lights use energy-efficient bulbs, such as compact fluorescent (CFL) bulbs?

Enter the number. \(\qquad\)
G-4c LGT1 How many indoor lights are turned on between 1 hour and 4 hours during a typical summer weekday?
Enter the number \(\square\)
G-4c1 [If LGT1>0] LGT1EE How many of these lights use energy-efficient bulbs, such as compact fluorescent (CFL) bulbs?

Enter the number.


G-6b [If INSTLCFL=1] HELPCFL INTERVIEWER INSTRUCTION: SHOW CARD 29. Some homeowners receive government or energy supplier assistance, including weatherization assistance and rebates, in paying for energy-efficient light bulbs. Please look at Card 29. Which of the following, if any, helped pay for any of your household's energy-efficient bulbs?

Did not receive any assistance ..................... 0
Manufacturer or retailer rebate..................... 1
Utility or energy supplier rebate.................. 2
Weatherization assistance ............................ 5
[If HELPCFL>0] HELPCFLY In what year did you receive this assistance?
2006................................................ 1
2007.............................................. 2
2008............................................... 3
2009............................................... 4

Prior to 2006................................... 5

SLDDRS Does your home have any sliding glass doors that go from a heated area to the outside or to an unheated area?
\(\qquad\)
No. .0
G-7a [If SLDDRS=1] DOOR1SUM How many of these sliding glass doors does your home have? INTERVIEWER INSTRUCTION: COUNT EACH PAIR OF SLIDING GLASS DOORS AS ONE
 DOOR.
Enter the number \(\qquad\)
\(\square\)
WINDOWS INTERVIEWER INSTRUCTION: SHOW CARD 30. Please look at Card 30. Approximately, how many windows does your home have? Each window that opens separately should be counted as one window. Do not include any windows that are in unheated parts of your home.
1 or 2 ............................................ 10
3 to 5 ........................................... 20
6 to 9 ............................................ 30
10 to 15........................................ 41
16 to 19........................................ 42
20 to 29........................................ 50
30 or more ................................... 60
None (volunteered)....................... 00
INTERVIEWER INSTRUCTION: IF ASKED: DOUBLE-HUNG OR SLIDER WINDOWS COUNT AS ONE WINDOW. ALSO COUNT WINDOWS THAT ARE FIXED IN PLACE. DO NOT INCLUDE WINDOWS (GLASS PANELS) IN DOORS.
G-8a TYPEGLASS INTERVIEWER INSTRUCTION: SHOW CARD 31. Please look at Card 31. Which picture best describes the type of glass in most of the windows in your home? Do not consider storm windows.
Single-pane glass .1
Double-pane glass.......................... 2
Triple-pane glass............................ 4
G-8b NEWGLASS How many of the windows in your home/apartment have been replaced since your household moved in? Is it . . .
All of the windows, .1
Some of the windows, or ............... 2
None of the windows? ................... 3
G-8c [If NEWGLASS<3] HELPWIN INTERVIEWER INSTRUCTION: SHOW CARD 10. Some homeowners receive government or energy supplier assistance in paying for new windows. Please look at Card 10. Which of the following, if any, helped pay for some or all of the cost of the new windows?
Did not receive any assistance 0
Manufacturer or retailer rebate .....  1
Utility or energy supplier rebate ..... 2
Tax credit .....  3
Subsidized loan ..... 
Weatherization assistance ..... 5
G-8d [If HELPWIN>0] HELPWINY In what year did you receive this assistance?
2006 ............................................... 1
2007
2008
. 3

Well insulated, ............................... 1
Adequately insulated, or................ 2
Poorly insulated?........................... 3
No insulation (if volunteered) ...... 4

G-10 INSTLINS Insulation is often added to the attic, ceiling, walls, crawl space, ducts, or pipes. Has any portion of your home/apartment been insulated since your household moved in?

Yes ..........................................................................................
G-10a [If INSTLINS=1] AGEINS INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. When was this insulation work done?

In the last 2 years ...................................... 01
2 to 4 years ago .......................................... 02
5 to 9 years ago .......................................... 03
10 to 14 years ago ..................................... 41
15 to 19 years ago ...................................... 42
20 years or more ........................................ 05
G-10b If AGEINS=01 or (AGEINS=02 and OCCUPYY \(\neq 2009,2010\) )] HELPINS INTERVIEWER INSTRUCTION: SHOW CARD 10. Some homeowners receive government or energy supplier assistance in paying for insulation. Please look at Card 10. Which of the following, if any, helped pay for some or all of the cost of the new insulation?

Did not receive any assistance .................... 0
Manufacturer or retailer rebate .................... 1
Utility or energy supplier rebate ................. 2
Tax credit..................................................... 3
Subsidized loan............................................ 4
Weatherization assistance ............................ 5
G-10c [If HELPINS>0] HELPINSY What year did you receive this assistance?
2006 ............................................... 1
2007 .............................................. 2
2008 ............................................... 3
2009 ............................................... 4

G-11 DRAFTY How often have you or other members of your household found your home too drafty this winter? Would you say it is. . .

All the time,.................................... 1
Most of the time, ........................... 2
Some of the time, or....................... 3
Never? ............................................ 4

G-12 INSTLWS Caulking and weather stripping is often done to seal windows, doors, and ducts. Has any portion of your home/apartment been caulked or weather stripped in order to seal air leaks since your household moved in?

Yes .................................................. 1
No.................................................. 0
G-12a [If INSTLWS=1] AGEWS INTERVIEWER INSTRUCTION: SHOW CARD 1. Please look at Card 1. When was this caulking or weather stripping work done?
In the last 2 years ..... 01
2 to 4 years ago ..... 02
5 to 9 years ago ..... 03
10 to 14 years ago ..... 41
15 to 19 years ago ..... 42
20 years or more ..... 05
G-12b If AGEWS=01 or (AGEWS=02 and OCCUPYY \(\neq 2009\), 2010)] HELPWS INTERVIEWERINSTRUCTION: SHOW CARD 10. Some homeowners receive government or energy supplierassistance in paying for caulking and weather stripping. Please look at Card 10 . Which of thefollowing, if any, helped pay for some or all of the cost of the caulking or weather stripping?
Did not receive any assistance ..... 0
Manufacturer or retailer rebate ..... 1
Utility or energy supplier rebate ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
Weatherization assistance ..... 5
G-12c [If HELPWS \(>0\) ] HELPWSY In what year did you receive this assistance?
2006 ..... 1
2007 ..... 2
2008 ..... 3
2009 ..... 4
G-13 AUDIT A home energy audit is when a professional examines how energy is used in all parts of a home. After examining a home, the energy auditor will suggest ways to reduce energy use and save money on energy bills. Has your home had an energy audit?
Yes ..... 1
No. ..... 0
G-13a [If AUDIT=1] AGEAUD When was the energy audit performed?
In the last 2 years ..... 01
2 to 4 years ago ..... 02
5 to 9 years ago ..... 03
10 to 14 years ago ..... 41
15 to 19 years ago ..... 42
20 years or more ..... 05
G-13b If AGEAUD=01 or (AGEAUD=02 and OCCUPYY \(\neq 2009\), 2010) ] HELPAUD INTERVIEWERINSTRUCTION: SHOW CARD 32. Some homeowners receive government or energy supplierassistance in paying for energy audits. Please look at Card 32. Which of the following, if any, helpedpay for some or all of the cost of the energy audit?
Did not receive any assistance ..... 0
Utility or energy supplier assistance ..... 2
Tax credit ..... 3
Subsidized loan ..... 4
Weatherization assistance ..... 5
G-13c [If HELPAUD>0] HELPAUDY In what year did you receive this assistance?
2006 ..... 1
2007 ..... 2
2008 .....  3
2009 ..... 4

\section*{G-14 IVCOMMG INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE MISCELLANEOUS CHARACTERISTICS OF THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.}
\(\qquad\)
\(\qquad\)
\(\qquad\)

\section*{Section H: FUELS USED}

\section*{H-1 OTHFUELUSE USEEL USENG USELP USEFO USEKERO USEWOOD USESOLAR You have mentioned using [CAPI WILL LIST THE FUELS IDENTIFIED AS USED BY THE HOUSEHOLD]. Do you use [CAPI WIL LIST THE FUELS WHICH HAVE NOT BEEN IDENTIFIED AS USED BY THE HOUSEHOLD] as a fuel for any purpose in your home? \\ \(\qquad\) \\ No .1 \\ H-1a [If OTHFUELUSE=1] OTHFUELFU Would you please tell me which of these other fuels you use and how you use it?}

\section*{H-2 ONSITE Do you have any on-site system that generates electricity such as a solar system or a small wind turbine?}
\(\qquad\)
No 0

H-2a [If ONSITE=1] ONSITETYPE What type of on-site system do you have?
Solar or Photovoltaic system ...................... 1
Small wind turbine...................................... 2
Combined Heat and Power system ............. 3
Other (Specify__).................... 4
\(\mathrm{H}-2 \mathrm{~b} \quad[\) If ONSITE \(=1]\) ONSITEGRID Is your on-site system connected to the grid?
Yes ................................................ 1
No .0

Now I would like to ask you a few questions about how your energy bills are paid.

H-3 [FOR EACH FUEL BY END-USE AS PREVIOUSLY IDENTIFIED BEING USED] PELHEAT] PELAC PELHOTWA PELCOOK PELLIGHT PGASHEAT PGASHTWA PUGCOOK PUGOTH FOPAY LPGPAY In the past 12 months was the [NAME THE FUEL USED] used for [NAME THE END-USE THE FUEL IS USED FOR] paid for by your household, included in the rent or condominium fee, or paid some other way?

HH Pays All All in Rent/Fee Other Way
Electricity for . . .
Heating your home.
1
.2
3
Air-Conditioning
1.
. 2
3
Heating water
1.
.2
Cooking.
1.
.. 2 3
\(\qquad\)
Natural Gas for . .
Heating your home....................................... 1 .......................... 2 ......................... 3
Heating water............................................... \(1 . . . . . . . . . . . . . . . . . . . . . . . . . . ~ . . . . . . . . . . . . . . . . . . . . . . . . ~ . ~ 3 ~ 8 ~\)
Cooking....................................................... 1.......................... 2 ......................... 3
Other uses ................................................... 1 .......................... 2 ......................... 3
Fuel Oil ...................................................................... 1 ........................... 2 ......................... 3
Propane (bottled gas).................................................. 1 .......................... 2 ......................... 3

H-3a [If PELHEAT or PELHOTWA or PELCOOK or PELAC or PELLIGHT=3] OTHERWAYEL You mentioned that some or all of the electricity used in your home was paid for in some other way. Who paid for that electricity? Was it . . .

A relative, .................................................... 1
A rental or condominium agent, or ............. 2
Was it paid by some other party?................ 3
H-3b [If PGASHEAT or PGASHTWA or PUGCOOK or PUGOTH=3] OTHERWAYNG You mentioned that some or all of the natural gas used in your home was paid for in some other way. Who paid for that natural gas? Was it . . .

A relative,
1
A rental or condominium agent, or ............. 2
Was it paid by some other party?................. 3
H-3c [If FOPAY=3] OTHERWAYFO You mentioned that the fuel oil used in your home was paid for in some other way. Who paid for that fuel oil? Was it . . .

A relative,1
A rental or condominium agent, or ..... 2
Was it paid by some other party? ..... 3

H-3d [If LPGPAY=3] OTHERWAYLPG You mentioned that the propane (bottled gas) used in your home was paid for in some other way. Who paid for that propane (bottled gas)? Was it . . .

A relative,
A rental or condominium agent, or ............. 2
Was it paid by some other party?................ 3

\section*{INTERVIEWER INSTRUCTION: IF OCCUPYY=2009 AND OCCUPYM>3, GO TO QUESTION H-9.}

H-4 [If USELP=1] LPGDELV Is propane (bottled gas) delivered to your home?
Yes ................................................. 1
No................................................... 0
H-4a [If LPGDELV=1] NDIFLPCO How many different companies delivered propane (bottled gas) to your home in 2009?

Enter the number \(\square\)
H-4b [If LPGDELV=1] NLPDELNC About how many deliveries did your household get in 2009?
Enter the number \(\qquad\)

H-7 [If USEKERO \(=1\) ] KEROCASH Did your household buy kerosene in 2009 and bring it home, that is, cash and carry?

Yes . .1

No. . 0

H-7a [If KEROCASH=1] NOCRCASH How many times in 2009 did your household buy kerosene and bring it home?

Enter the number.
Did not live here the full 12 months


H-7b [If KEROCASH=1] NKRGALNC There are five common sizes of portable kerosene containers: 1 gallon, 3 gallon, 5 gallon, 10 gallon, and 55 gallon. On average how many gallons of kerosene did your household buy and bring home each time?

Enter the amount


Some other size 66

Not sure.
H-7c [If KEROCASH=1] PRICEKER On average, about how much per gallon did your household pay for kerosene?

Enter the amount price


H-7d [If KEROCASH=1] TOTPAYKER About how much did you pay for kerosene each time your household bought it (total amount)?

Enter the total amoun


H-8 [If USEWOOD=1] You mentioned that you use wood as a fuel in your household. What kind of wood does your household burn? Does your household burn . . . (Mark all that apply.)
Yes \(\quad\) No

WOODLOGS Wood logs or split wood?............................................................ 0
WDSCRAP Wood scraps?.................................................................................... 0
WDPELLET Wood pellets? ................................................................................. 0
WDOTHER Any other kind of wood? ................................................................ 0
H-8a [If USEWOOD=1] WOODAMT In 2009, about how many cords of wood did your household burn?
Number of cords \(\qquad\)
H-8a1 [If WOODAMT=DK] NUMCORDS INTERVIEWER INSTRUCTION: SHOW CARD 34. Please look at Card 34. Although you do not know the exact amount of wood burned, it is helpful to have an estimate. In 2009, about how many cords of wood did your household burn?

Half a cord or less.......................... 1
About one cord .............................. 2
About two cords ............................ 3
Three to five cords......................... 4
More than five cords...................... 5

IVCOMMH INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE FUELS USED BY THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section I: FUEL BILLS}

I-1 In this interview you have told me how your household uses energy. In addition, we would like to find out how much [ENTER THE FUELS THAT THE HOUSEHOLD USES] you actually used in the past year.

Getting that information directly from your energy suppliers would add to the data you've given me and improve our forecasts of energy consumption. I will want to collect information about all of your energy accounts. You'll probably want to get any recent bills that were sent to you by your suppliers to help with these questions. If it is alright with you, I can copy the bills directly into my computer.

I-2 [If PELHEAT \(=1\) or PELHOTWA=1 or PELCOOK=1 or PELAC=1 or PELLIGHT=1] ELBILLTOSCAN Do you have a recent electric bill that I can scan into my computer?

Yes ................................................ 1
No. .0

I-2a
[IF ELBILLTOSCAN=1] ELSUPPNAM ELSUPPACCTNUM Thank you. I will scan this bill and any others you may have at the end of this interview. INTERVIEWER INSTRUCTION: ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-2b [If ELBILLTOSCAN=0] ELSUPPNAM ELSUPPACCTNUM What is the name and account number of your household's electricity supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
I-2b1 What is the address and telephone number for that electricity supplier?
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)
natural gas bill that I can scan into my computer?
Yes ................................................. 1
No.
I-3a [IF NGBILLTOSCAN=1] NGSUPPNAM NGSUPPACCTNUM Thank you. I will scan this bill and any others you may have at the end of this interview. INTERVIEWER INSTRUCTION: ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-3b
[If NGBILLTOSCAN=1] NGSUPPNAM NGSUPPACCTNUM What is the name and account number of your household's natural gas supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
I-3b1 What is the address and telephone number for that natural gas supplier?
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-4 [If LPGPAY=1] LPGBILLTOSCAN Do you have a recent bill from your [If NDIFLPCO>1: most-used] propane (bottled gas) supplier that I can scan into my computer?

Yes ................................................ 1
No. 1
[IF LPGBILLTOSCAN=1] LPGSUPPNAM LPGSUPPACCTNUM INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
\(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-4b [If LPGBILLTOSCAN=0] LPGSUPPNAM LPGSUPPACCTNUM What is the name and account number of your household's [If NDIFLPCO \(>1\) : most-used] propane (bottled gas) supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
I-4bl What is the address and telephone number for that propane (bottled gas) supplier?

Street \(\qquad\)
City
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)
[If NDIFLPCO \(>1\) 1] LPGBILLTOSCAN2 Earlier you told me that [FILL: NDIFLPCO] different companies delivered propane (bottled gas) to your home in the past 12 months. Do you have a recent bill from [If NDIFLPCO \(=2\) : your other; If NDIFLPCO \(>2\) : the second most-used] propane (bottled gas) supplier that I can scan into my computer?
\[
\begin{aligned}
& \text { Yes............................................................................................... } \\
& \text { No...... }
\end{aligned}
\]

I-5a [IF LPGBILLTOSCAN2=1] LPGSUPPNAM2 LPGSUPPACCTNUM2 INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street
City
\(\qquad\)
Area Code \(\qquad\) Telephone Number
[If LPGBILLTOSCAN2 \(=0\) ] LPGSUPPNAM2 LPGSUPPACCTNUM2 What is the name and account number of your household's [If NDIFLPCO \(=2\) : other; If NDIFLPCO \(>2\) : second most-used] propane (bottled gas) supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
\(\mathrm{I}-5 \mathrm{~b} 1 \quad\) What is the address and telephone number for that propane (bottled gas) supplier?


I-6 [If FOPAY=1] FOBILLTOSCAN Do you have a recent bill from your [If NDIFFOCO \(>1\) : most-used] fuel oil supplier that I can scan into my computer?

Yes ..........................................................................................
I-6a [IF FOBILLTOSCAN=1] INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
\begin{tabular}{ll} 
State \\
Area Code ___ Telephone Number \(\quad\) ZIP Code \\
\hline
\end{tabular}

I-6b [If FOBILLTOSCAN=0] FOSUPPNAM FOSUPPACCTNUM What is the name and account number of your household's [If NDIFFOCO>1: most-used] fuel oil supplier?

Supplier Name \(\qquad\)
Account Number \(\qquad\)

I-6b1 What is the address and telephone number for that fuel oil gas supplier?
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-7 [If NDIFFOCO \(>1\) 1] FOBILLTOSCAN2 Earlier you told me that [FILL: NDIFFOCO] different companies delivered fuel oil to your home in the past 12 months. Do you have a recent bill from [If NDIFFOCO=2: your other; If NDIFFOCO \(>2\) : the second most-used] fuel oil supplier that I can scan into my computer?

Yes .................................................
No 0

I-7a [IF FOBILLTOSCAN2=1] INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
State \(\quad\) ZIP Code

Area Code \(\qquad\) Telephone Number \(\qquad\)

I-7b [If FOBILLTOSCAN2=0] FOSUPPNAM2 FOSUPPACCTNUM2 What is the name and account number of your household's [If NDIFFOPCO \(=2\) : other; If NDIFFOCO \(>2\) : second most-used] fuel oil supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)

I-7b1 What is the address and telephone number for that fuel oil supplier?
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-8 [If KERODEL=1] KEROBILLTOSCAN Do you have a recent bill from your household's [If NDIFKRCO>1: most-used] kerosene supplier that I can scan into my computer?

Yes ............................................... 1
No
. 0
I-8a [IF KEROBILLTOSCAN=1] KEROSUPPNAM KEROSUPPACCTNUM INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Street \(\qquad\)
Addressee \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-8b [If KEROBILLTOSCAN=0] KEROSUPPNAM KEROSUPPACCTNUM What is the name and account number of your household's [If NDIFKRCO \(>1\) : most-used] kerosene supplier and the name of the person to whom the bill is sent?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
\(\mathrm{I}-8 \mathrm{~b} 1 \quad\) What is the address and telephone number for that kerosene gas supplier?
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)

I-9 [If NDIFKRCO>1] KEROBILLTOSCAN2] Earlier you told me that [FILL:NDIFKRCO] different companies delivered kerosene to your home in the past 12 months. Do you have any recent bills from [If NDIFKRCO=2: your other; If NDIFKRCO \(>2\) : the second most-used] kerosene supplier that I can scan into my computer?

Yes
No.
I-9a [IF KEROBILLTOSCAN2=1] KEROSUPPNAM2 KEROSUPPACCTNUM2 INTERVIEWER INSTRUCTION: IF YOU HAVE NOT BY NOW MADE IT CLEAR TO THE RESPONDENT THAT THE BILLS WILL BE SCANNED AT THE END OF THE INTERVIEW, THEN READ THIS STATEMENT: Thank you. I will scan this bill and any others you may have at the end of this interview. ENTER THE SUPPLIER'S NAME, THE ACCOUNT NUMBER, THE PERSON TO WHOM THE BILL IS ADDRESSED, AND THE SUPPLIER'S ADDRESS AND TELEPHONE NUMBER AS THEY APPEAR ON THE BILL THE RESPONDENT JUST GAVE YOU.

Supplier Name \(\qquad\)
Account Number \(\qquad\)
Addressee \(\qquad\)
Street
City
\(\qquad\)
Area Code \(\qquad\) Telephone Number
[If KEROBILLTOSCAN2 \(=0\) ] KEROSUPPNAM2 KEROSUPPACCTNUM2 What is the name and account number of your household's [If NDIFKRPCO \(=2\) : other; If NDIFKRCO \(>2\) : second most-used] kerosene supplier?

Supplier Name \(\qquad\)
Account Number \(\qquad\)
I-9b1 What is the address and telephone number for that kerosene supplier?


INTERVIEWER INSTRUCTION: TAKE OUT THE YELLOW HOUSING UNIT NOTES/MEASUREMENTS BOOKLET FOR THIS HOUSING UNIT. CATI WILL TELL YOU THE CASE ID NUMBER FOR THIS HOUSING UNIT TO ENSURE THAT YOU USE THE CORRECT BOOKLET.

I-10 SIGNFORM Thank you for this information about your energy suppliers. So we can collect additional information from your fuel suppliers about the actual amounts of energy you use, would you please sign this authorization form that gives them your permission to give us that information?

INTERVIEWER INSTRUCTION: GIVE THE AUTHORIZATION FORM TO THE RESPONDENT AND RECORD WHETHER THE RESPONDENT SIGNED IT OR REFUSED TO SIGN.

Authorization Form Signed .1
Authorization Form Not Signed .0

I-11 KFUELOT Do any of your household fuel bills include charges for fuel used for some purpose other than for the personal use of the members of your household?

Yes .1
No. .0

I-11a [If KFUELOT=1] INTERVIEWER INSTRUCTION: SHOW CARD 35. Please look at Card 35. For which of the purposes listed are costs of fuel included in your household fuel bills? Mark all that apply. INTERVIEWER INSTRUCTION: PROBE, IF NECESSARY: Any others?
FARM Farm buildings or machinery ..... 1
TENANT The house or apartment of another household ..... 2
BUSINESS A business or office ..... 3
OTHERUSE Some use other than your own personal use? (Specify _ ..... 4I-11b [If KFUELOT=1] Which fuel bills include costs of fuel used for purposes other than your own livingquarters? Is it
 .
BILLUG Natural gas (from underground pipes), ..... 1
BLPUSE Propane (bottled gas), ..... 2
BILLFOIL Fuel oil, .....  3
BILLKER Kerosene, or ..... 4
BILLEL Electricity? ..... 5
I-11b1 [If BILLPUR=1] BILLUGP INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look atCard 3. What portion of the natural gas bill is for non-household uses?
Very little (1-4\%) .....  1
Some (5-33\%) .....  2
About half (34-66\%) .....  3
About three-quarters (67-95\%) .....  4
Most of it (96-99\%) .....  5
I-11b2 [If BILLPUR=2] BILLLGP INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look atCard 3. What portion of the propane (bottled gas) bill is for non-household uses?
Very little (1-4\%) .....  1
Some (5-33\%). .....  2
About half (34-66\%). .....  3
About three-quarters (67-95\%) .....  4
Most of it (96-99\%) ..... 5
I-11b3 [If BILLPUR=3] BILLFOP INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look atCard 3. What portion of the fuel oil bill is for non-household uses?
Very little (1-4\%). .....  1
Some (5-33\%) .....  2
About half (34-66\%). .....  3
About three-quarters (67-95\%) .....  4
Most of it (96-99\%) ..... 5
I-11b4 [If BILLPUR=4] BILLKERP INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look atCard 3. What portion of the kerosene bill is for non-household uses?
Very little (1-4\%) .....  1
Some (5-33\%) .....  2
About half (34-66\%) ..... 3
About three-quarters (67-95\%) .....  4
Most of it (96-99\%) .....  5
I-11b5 [If BILLPUR=5] BILLELP INTERVIEWER INSTRUCTION: SHOW CARD 3. Please look atCard 3. What portion of the electric bill is for non-household uses?
Very little (1-4\%) .....  1
Some (5-33\%) .....  2

I-12 For verification purposes, may I have your name, telephone number, and, if you have one, your e-mail address? My supervisor may want to contact you about your experience during this interview.

Name \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)
Email Address \(\qquad\)

I-13 [If KOWNRENT=2,3 or KOWNCOND=1] We may need some additional information about the fuels used in this building. May I have the name of the person or company to whom you pay rent or condominium/coop fees who is responsible for actually paying the [ENTER THE TYPES OF FUEL BILLS PAID] bills for this dwelling?

Name \(\qquad\)
Street \(\qquad\)
City \(\qquad\)
State \(\qquad\) ZIP Code \(\qquad\)
Area Code \(\qquad\) Telephone Number \(\qquad\)
I-13a [If TYPEHUQ \(=1,4,5]\) COMPLEXN Does the complex or development where you live have a formal name?
\(\qquad\)
No . .1 .0

I-13a1 [If COMPLEXN=1] CPLXNAME What is the name?
Name \(\qquad\)

I-14 IVCOMMI INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THIS HOUSING UNIT'S FUEL BILLS THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section J: HOUSEHOLD CHARACTERISTICS}

Now I have a few questions about the people living in this home.

J-1 HHINTRO The first few questions are about the householder. That is, one of the people who owns or rents the home. Are you a householder?

Yes ................................................. 1
No................................................... 0

J-2 HHSEX [If HHINTRO=1:Are you; If HHINTRO=0: Is the householder] a male or a female?
Male
.2
Female............................................ 1

J-3 HHAGE How old [If HHINTRO=1: are you?; If HHINTRO=0: is the householder?]
Age of householder \(\qquad\)

J-4 EMPLOYHH How would you describe [If \(H H I N T R O=1\) : your; If HHINTRO=0: the householder's] employment status? Would you say...

Employed full-time, .. 1
Employed part-time, or .2
Not employed/retired?.................... 0

J-5 SPOUSE [If HHINTRO=1: Are you; If HHINTRO=0: Is the householder] living with a spouse or partner?
Yes ................................................. 1
No................................................... 0

J-6 SDESCENT [If HHINTRO=1: Are you; If HHINTRO=0: Is the householder] Hispanic or Latino?
Yes ................................................ 1
No.................................................. 0

J-7 ORIGIN INTERVIEWER INSTRUCTION: SHOW CARD 36. Please look at Card 36. Which describes [If HHINTRO \(=1\) : your; If HHINTRO \(=0\) : the householder's] race? You can select one or more categories.

White
01
Black or African-American...................................... 02
American Indian or Alaska Native .......................... 03
Asian ........................................................................ 41

Other (if volunteered) ............................................. 05
Hispanic (if volunteered).......................................... 07
J-8 EDUCATION INTERVIEWER INSTRUCTION: SHOW CARD 37. Please look at Card 37. What is the highest degree or level of school [If HHINTRO \(=1\) : you have; If \(H H I N T R O=0\) : the householder has] completed?

No schooling completed \(\qquad\) 0

Kindergarten to grade 12 (No Diploma) .................... 1
RECS (1905-0092)

High school diploma or GED.................................... 2
Some college, no degree............................................. 3
Associate's degree (for example: AA, AS) ............... 4
Bachelor's degree (for example: BA, BS).................. 5
Master's degree (for example: MA, MS, MBA) ....... 6
Professional degree (for example: MD, JD)............... 7
Doctorate degree (for example: PhD, EdD) .............. 8

J-9 NHSLDMEM Including yourself, how many people normally live in this household? Do not include anyone who is just visiting, those away in the military, or children who are away at college.

Number of household members \(\qquad\)
\(\square\)

J-10a [If NHSLDMEM> 1] AGEHHMEM2 Other than [If HHINTRO=1: yourself; If HHINTRO=0: the householder], what is the age of the oldest person in this household?

Age of oldest person in household


J-10b [If NHSLDMEM \(>2\) 2] AGEHHMEM3-14 Of the [ENTER THE NUMBER OF REMAINING HOUSEHOLD MEMBERS] remaining members of this household, what is the age of the next oldest person?

Age of next oldest person in household \(\square\)
INTERVIEWER INSTRUCTION: REPEAT QUESTION J-10b UNTIL ALL BUT THE YOUNGEST MEMBER OF THE HOUSEHOLD HAS BEEN ENUMERATED. CAPI WILL KEEP TRACK FOR YOU AND BRING UP THE QUESTION FOR THE YOUNGEST PERSON WHEN APPROPRIATE.

J-10c [If NHSLDMEM Counter=1] AGEHHMEMY What is the age of the youngest person in this household?
Age of youngest person in household \(\square\)

J-11 HBUSNESS Does anyone in this household operate a home-based business or service?
\(\qquad\)
No. .1 . 0

J-11a [If HBUSNESS=1] OTHBUS What kind of business or service is this?

J -12 ATHOME On a typical week day is there someone at home most or all of the day?
Yes .................................................................................................

J-13 TELLWORK Does anyone in this household telecommute or telework at anytime during the week?

Yes ................................................ 1
No.

J-13a [If TELLWORK=1] TELLDAYS How many days, on average, does someone in this household telecommute or telework each month?

Number of telework days.. \(\square\)

OTHWORK Is there any other kind of activity occurring in your home that uses a lot more energy than would normally be used in a home?
Yes ................................................ 1
No.......................................... 0
\(\qquad\)

J-15 In 2009, did you or any member of your household receive income from any of the following sources?
Yes
No

WORKPAY a. Employment income including wages, salaries, commissions, bonuses, and tips from all jobs, as well as self-employment income from a business or farm ......................................................... 1 .......................... 0

RETIREPY b. Retirement income from Social Security, Railroad
Retirement, pensions or other retirement funds
. 1. \(\qquad\) 0
SSINCOME c. Supplemental Security Income (SSI)

1. .....  0
CASHBEN d. Welfare payments or cash assistance

1. .....  0
INVESTMT e. Income from interest, dividends, rental properties,
royalties, estates, or trusts ..... 0
RGLRPAY f. Any other regular sources of income such as Veterans'(VA) payments, survivor or disability pensions, unemploymentcompensation, child support, or alimony 1. .0

J-16 MONEYPY INTERVIEWER INSTRUCTION: SHOW CARD 38. Please look at Card 38. Including all of the income sources I just asked you about, which category best describes the 2009 total combined income of all household members before taxes and deductions?

Less than \$2,500........................................ 01
\$2,500 to \$4,999......................................... 02
\$5,000 to \$7,499......................................... 03
\$7,500 to \$9,999......................................... 04
\$10,000 to \$14,999.................................... 05
\$15,000 to \$19,999..................................... 06
\$20,000 to \$24,999..................................... 07
\$25,000 to \$29,999..................................... 08
\$30,000 to \$34,999..................................... 09
\$35,000 to \$39,999.................................... 10
\$40,000 to \$44,999.................................... 11
\$45,000 to \$49,999.................................... 12
\$50,000 to \$54,999 ..................................... 13
\$55,000 to \$59,999 ..................................... 14
\$60,000 to \$64,999 .................................... 15
\$65,000 to \$69,999..................................... 16
\$70,000 to \$74,999..................................... 17
\$75,000 to \$79,999.................................... 18
\$80,000 to \$84,999 .................................... 19
\$85,000 to \$89,999 ..................................... 20
\$90,000 to \$94,999 ..................................... 21
\$95,000 to \$99,999.................................... 22
\$100,000 to \$119,999 ................................ 23
\$120,000 or more ....................................... 24

J-16a [If MONEYPY=96,97] INCOMEPLUS Was your 2009 annual household income under [THE CAPI SYSTEM WILL FILL IN THE DOLLAR AMOUNT]?
\(\qquad\)
\(\qquad\)
[Income Filter] FOODASST] Some households receive additional assistance to help pay for food. In 2009, did
you or any members of your household receive food stamps or WIC assistance (Women, Infants, and Children nutrition program)?

Yes ................................................ 1
No................................................... 0

J-18 IVCOMMJ INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THE HOUSEHOLD CHARACTERISTICS OF THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section K: ENERGY ASSISTANCE}

\author{
INTERVIEWER INSTRUCTION: SECTION K—ENERGY ASSISTANCE IS TO BE ASKED ONLY OF THOSE RESPONDENTS WHO QUALIFY FOR ASSISTANCE UNDER THE LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP). ELIGIBILITY FOR LIHEAP IS DETERMINED BY EACH STATE AND IS DEPENDENT ON HOUSEHOLD INCOME AND THE HOUSEHOLD SIZE. \\ \section*{CAPI WILL DETERMINE IF YOU ARE TO ADMINISTER SECTION K TO THIS RESPONDENT. IF THE RESPONDENT'S HOUSEHOLD IS NOT ELIGIBLE, CAPI WILL AUTOMATICALLY SKIP THESE QUESTIONS AND TAKE YOU TO SECTION L-HOUSING UNIT MEASUREMENTS.}
}

K-1 INTERVIEWER INSTRUCTION: SHOW CARD 39. Some households may have faced challenges in paying home energy bills. The following questions ask about challenges your household may have had paying home energy bills. When thinking about these questions, include all of your experiences in 2009, even in homes different from the one you live in now. Please look at Card 39. In 2009...
\begin{tabular}{lccc}
\begin{tabular}{c} 
Almost \\
Every
\end{tabular} & \begin{tabular}{c} 
Only \\
Some
\end{tabular} & 1 or 2 & \\
Month & \(\underline{\text { Months }}\) & \(\underline{\text { Months }}\) & \(\underline{\text { Never }}\) \\
\hline
\end{tabular}

K-1a SCALEB How often did your household reduce or forgo expenses for basic household necessities, such as medicine or food, due to your home energy bill? \(\qquad\)
\(\qquad\)

K-1b SCALEG How often did your household keep your home at a temperature that you felt was unsafe or unhealthy? \(\qquad\) 1. \(\qquad\) 2. 3. 4

K-1c SCALED How often did your household pay an amount less than what you owed on your home energy bill, because you were unable to afford the whole home energy bill?
1. \(\qquad\)
\(\qquad\) .. 3 .4

K-1d SCALEE When home energy bills are not paid on time, it is common for energy utilities and suppliers to send 'late notices.' If the bill is very late, they will send a 'disconnect' or 'shut-off notice'. How often did an energy utility or supplier send you a 'disconnect' or 'shut-off notice'? 1. \(\qquad\) 34

K-1d1 [If SCALEE=1] PAYARRNG Did you enter into a payment arrangement with your energy utility or supplier in response to the 'disconnect' or 'shut-off notice'?

> Yes................................................................................................... No .......

K-1e SCALEC In order to pay your home energy bill, how often did you need to use a payday loan, a tax refund anticipation loan, a car title loan, or another type of short-term, high-interest loan?
1. \(\qquad\) 2 3. .4

K-2 ENERGYAID There are government assistance programs that help households pay home energy bills AND help households pay for the repair or replacement of their heating or cooling equipment. In 2009, did your household receive this type of assistance?
Yes .1
No. .0

K-3 NOPAY In 2009 was your electricity ever disconnected because you were unable to pay your home energy bill? Please remember to include any instances that occurred from January 1 through December 31 of last year.

> Yes ............................................................................................ No......

K-3a [If NOPAY=1] During which of the following months did your household lose the use of your electricity because the service was disconnected? (Mark all that apply.)


Yes ................................................. 1
No .................................................. 0
K-3b1 [If ENERGYAID \(=1\) and NOPYEL=1] NOPYELREST You mentioned receiving home energy assistance. Did receiving energy assistance help you to restore heating to your home?

Yes................................................. 1
No 0

K-3c [If ELCOOL=1 and NOPAY=1] NOPYELAC While your electricity was disconnected, was there a time when you wanted to use your air-conditioner but were unable to?
\[
\begin{aligned}
& \text { Yes ................................................................................................... }
\end{aligned}
\]

K-3c1 [If ENERGYAID \(=1\) and NOPYELAC=1] NOPYELACREST Did receiving home energy assistance help you to restore cooling to your home?

Yes.................................................................................................
No

K-4 NOGA In 2009, was your natural gas service ever disconnected because you were unable to pay your home energy bill? Please remember to include any instances that occurred from January 1 through of December 31 last year.
Yes . .1
No. \(\qquad\) .0

K-4a [If NOGA=1] During which of the following months did your household lose the use of your natural
gas because the service was disconnected? Mark all that apply.
\begin{tabular}{|c|c|c|}
\hline NOGAJAN & January 2009........................ 1 & NOGAJUL July 2009 ............................. 7 \\
\hline NOGAFEB & February 2009....................... 2 & NOGAAUG August 2009......................... 8 \\
\hline NOGAMAR & March 2009 ......................... 3 & NOGASEP September 2009 ..................... 9 \\
\hline NOGAAPR & April 2009 ........................... 4 & NOGAOCT October 2009 ...................... 10 \\
\hline NOGAMAY & May 2009 ........................... 5 & NOGANOV November 2009 .................. 11 \\
\hline NOGAJUN & June 2009 ............................. 6 & NOGADEC December 2009.................. 12 \\
\hline
\end{tabular}

K-4b [If NOGA=1] NOPYGA While your natural gas service was disconnected, was there a time when you wanted to use your main source of heat but were unable to?
\(\qquad\)
Yes .1

No . .0

K-4b1 [If ENERGYAID \(=1\) and NOPY GA=1] NOPYGAREST Earlier, you mentioned receiving home energy assistance. Did receiving home energy assistance help you to restore heating to your home?
\(\qquad\)
No
.0

K-5 NOFUEL In 2009, did your fuel oil, kerosene, propane, or wood ever run out because you were unable to pay for a home energy delivery? Please remember to include any instances that occurred from January 1 through December 31 of last year.
\(\qquad\)
Yes .1
No. .0

WORKPAY a. Employment income including wages, salaries, commissions, bonuses, and tips from all jobs, as well as

NOFLJAN January 2009............................. 1
NOFLFEB February 2009 ........................... 2
NOFLMAR March 2009 ............................. 3
NOFLAPR April 2009 ................................ 4
NOFLMAY May 2009 ................................ 5
NOFLJUN June 2009 .................................. 6

NOFLJUL July 2009 ................................... 7
NOFLAUG August 2009............................. 8
NOFLSEP September 2009 ........................ 9
NOFLOCT October 2009 .......................... 10
NOFLNOV November 2009...................... 11
NOFLDEC December 2009....................... 12

K-5b [If NOFUEL=1] NOPYFL When you ran out of your heating fuel, was there a time when you wanted to use your main source of heat but were unable to?
\[
\begin{aligned}
& \text { Yes ............................................................................................... } \\
& \text { No ....... }
\end{aligned}
\]

K-5b1 [If ENERGYAID=1 and NOPYFL=1] NOPYFLREST] You mentioned receiving home energy assistance. Did receiving home energy assistance help you to restore heating to your home?
\(\qquad\)
Yes. .1
No .0

Now, let's talk about problems you may have had with your heating or cooling equipment.
K-6 [If HEATHOME=1] NOHTBRK In 2009, were you unable to use your main heating equipment because it was broken?
\(\qquad\)
Yes
No. \(\qquad\)
K-6a [If NOHTBRK =1] HTFIX Was your heating equipment fixed or replaced?
Yes ................................................. 1
No 0
K-6a1 [If ENERGYAID=1 and HTFIX=1] NOPYFIXREST] Did receiving home energy assistance help you to fix or replace your heating equipment?
Yes...........................................................................................
K-7 [If COOLTYPE=1,3] NOCACBRK In 2009, were you unable to use your central air conditioner because it was broken?
Yes ................................................ 1
No.................................................. 0
K-7a [If NOCACBRK \(=1]\) CACFIX Was your central air conditioner fixed or replaced?
Yes ................................................ 1
No ................................................. 0
K-7a1 [If ENERGYAID \(=1\) and CACFIX=1] NOPYFIXACREST Did receiving home energy assistance help you to fix or replace your central air conditioner?
Yes................................................. 1
No ................................................. 0
K-8 [If COOLTYPE=2,3] NOWWACBRK In 2009, were you unable to use any room air conditioning unit because it was broken?
Yes ................................................. 1
No................................................... 0
K-8a [If NOWWACBRK=1] WWACFIX Was your room air conditioning unit fixed or replaced?
Yes ......................................................................................................
K-8a1 [If ENERGYAID \(=1\) and WWACFIX \(=1\) ] WWACAID Did receiving home energy assistance help you to fix or replace your room air conditioning unit?
Yes............................................... 1
No
0

Now I would like to ask you a few questions about how your home heating and cooling has affected the health of your household members. In 2009:

Yes No
K-9a [If SCALEG=1,2,3] COLDMA Did anyone in your household need medical attention because your home was too cold?
1. \(\qquad\) .0

K-9a1 [If COLDMA=1] COLDMA60 You responded that someone in your household needed medical attention. Were any of the people who needed medical attention 60 years or older? 1.
K-9a2 [If COLDMA=1] COLDMA5 Were any of the people who needed medical attention 5 years old or younger? ..... 1. .....  0K-9b [If SCALEG=1,2,3] HOTMA Did anyone in your household need medicalattention because your home was too hot?1.
\(\qquad\)
K-9b1 [If HOTMA=1] HOTMA60 You responded that someone in yourhousehold needed medical attention. Were any of the people whoneeded medical attention 60 years or older?
\(\qquad\) 1. \(\qquad\) 0
K-9b2 [If HOTMA=1] HOTMA5 Were any of the people who needed medicalattention 5 years old or younger?1.
\(\qquad\)
K-9c [If CARRY=1 or RANGE=1 or OUTGRILL=1 or CHIMNEY=1] ALTHTFR Did any
fire start in your home as a result of using an alternate heating source, suchas space heaters, your kitchen stove or oven, an outdoor grill, or yourfireplace?
\(\qquad\) 1. \(\qquad\)0
K-9c1 [If ALTHTFR=1] HTFRNUM How many individuals needed medical attention because of the fire?
EnterNumber \(\square\)
K-9d [If NOPAYEL=1] ALTLTFR Did any fire start in your home as a result of using an alternate lighting source, such as candles or kerosene lanterns? ........ 1 \(\qquad\) .0

\section*{K-9d1 [If ALTLTFR=1] LTFRNUM How many individuals needed medical attention because of the fire?}

\section*{Enter Number}

K-10 BUDGETPP Some energy utilities and suppliers offer budget payment plans that allow a household to pay the same amount on the home energy bill each month. In 2009, did your household use a budget plan for any home energy bill?
\(\qquad\)
No. ..0

K-11 IVCOMMK INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT ENERGY
 ASSISTANCE RECEIVED BY THIS HOUSING UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE
 RESPONDENT'S ANSWERS.

\section*{Section L: RESIDENTIAL TRANSPORTATION}

INTERVIEWER INSTRUCTIONS: YOUR HOUSEHOLD ALSO CONSUMES ENERGY DRIVING CARS, SUVS, TRUCKS, AND OTHER VEHICLES. I'D NOW LIKE TO ASK YOU A FEW QUESTIONS ABOUT VEHICLES THAT MAY BE USED BY YOU AND OTHER MEMBERS OF YOUR HOUSEHOLD.

L-1 VEHICLES Do you or any other members of your household own or have the regular use of a car, truck, SUV, van, or other type of vehicle? Do not include motorcycles or mopeds.

Yes ................................................ 1
No.................................................. 0
\(\rightarrow\) GO TO SECTION M.

L-2 NUMVEHICLES How many vehicles do you and members of your household have?
Number of vehicles \(\qquad\)

Now I would like to ask you a few questions about [If NUMVEHICLES=1: the vehicle; If NUMVEHICLES>1: each vehicle.]

L-3a [If NUMVEHICLES \(>0\) ] VEHTYPE1 What kind of vehicle is [If NUMVEHICLE=1: it; If NUMVEHICLE \(>1\) : the most used vehicle]?

Car.................................................. 1
Truck .............................................. 2
SUV................................................ 3
Van................................................. 4
Other (Specify)............................... 5
L-3b [If NUMVEHICLES \(>0\) ] VEHMAKE1 What make is [If NUMVEHICLE=1: it; If NUMVEHICLE \(>1\) : the most used vehicle]?

Vehicle make \(\square\)
L-3c [If NUMVEHICLES \(>0\) ] VEHMOD1 What model is [If NUMVEHICLE=1: it; If NUMVEHICLE \(>1\) : the most used vehicle]?

Vehicle model \(\square\)
L-3d [If NUMVEHICLES \(>0\) ] VEHAGE1 INTERVIEWER INSTRUCTIONS: SHOW CARD 1. Please look at Card 1. How old is If NUMVEHICLE=1: it; If NUMVEHICLE> 1 : the most used vehicle]? Your best estimate is fine.

Less than 2 years old.................................. 01
2 to 4 years old.......................................... 02
5 to 9 years old ........................................... 03
10 to 14 years old ....................................... 41
15 to 19 years old ...................................... 42
20 years or older........................................ 05
As old as the home (if volunteered) .......... 06

L-3e [If NUMVEHICLES \(>0\) ] VEHMILES1 How many miles does the most used vehicle have on it?

Vehicle miles


L-4a [If NUMVEHICLES \(>\) 1] VEHTYPE2 What kind of vehicle is the second most used vehicle?
\[
\text { Car................................................... } 1
\]
Truck ..... 2
SUV. .....  3
Van. ..... 4
Other (Specify) ..... 5

L-4b [If NUMVEHICLES \(>\) 1] VEHMAKE2 What is the make of the second most used vehicle?
Vehicle make. \(\square\)
[If NUMVEHICLES \(>1\) 1] VEHMOD2 What is the model of the second most used vehicle?
Vehicle model \(\square\)
L-4d [If NUMVEHICLES \(>1\) 1] VEHAGE2 INTERVIEWER INSTRUCTIONS: SHOW CARD 1. Please look at Card 1. How old is the second most used vehicle? Your best estimate is fine.

Less than 2 years old ................................. 01
2 to 4 years old........................................... 02
5 to 9 years old .......................................... 03
10 to 14 years old ...................................... 41
15 to 19 years old ...................................... 42
20 years or older......................................... 05
As old as the home (if volunteered) .......... 06
L-4e [If NUMVEHICLES \(>1]\) VEHMILES2 How many miles does the second most used vehicle have on it?
Vehicle miles............................... \(\square\)

L-5a [If NUMVEHICLES>2] VEHTYPE3 What kind of vehicle is the third most used vehicle?
Car................................................ 1
Truck .............................................. 2
SUV............................................... 3
Van................................................ 4
Other (Specify).............................. 5
L-5b [If NUMVEHICLES>2] VEHMAKE3 What is the make of the third most used vehicle?
Vehicle make


L-5c [If NUMVEHICLES \(>2\) 2] VEHMOD3 What is the model of the third most used vehicle?
Vehicle model \(\square\)
L-5d [If NUMVEHICLES>2] VEHAGE3 INTERVIEWER INSTRUCTIONS: SHOW CARD 1. Please look at Card 1. How old is the third most used vehicle? Your best estimate is fine.

Less than 2 years old................................. 01
2 to 4 years old ........................................... 02
5 to 9 years old .......................................... 03
10 to 14 years old ...................................... 41
15 to 19 years old ...................................... 42
20 years or older......................................... 05
As old as the home (if volunteered) .......... 06
L-5e [If NUMVEHICLES>2] VEHMILES3 How many miles does the third most used vehicle have on it?

Vehicle miles............................... \(\square\)

L-6 IVCOMML INTERVIEWER INSTRUCTION: RECORD ANY INFORMATION HERE ABOUT THIS HOUSEHOLD'S VEHICLES THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS.

\section*{Section M: HOUSING UNIT MEASUREMENTS}

INTERVIEWER INSTRUCTION: TAKE OUT THE YELLOW HOUSING UNIT NOTES/MEASUREMENTS BOOKLET FOR THIS HOUSING UNIT. CAPI WILL TELL YOU THE CASE ID NUMBER FOR THIS HOUSING UNIT TO ENSURE THAT YOU USE THE CORRECT BOOKLET.

M-1 SQFTEST To understand the usage of energy in your home/apartment, we need to know about its size and shape. Would you tell me how many square feet of living space you have in your home/apartment? Your best estimate will do.

Estimated square footage


INTERVIEWER INSTRUCTION: IF APTFLOORS>3 OR STORIES=50 GO TO QUESTION M-3. THIS HOUSING UNIT IS SOME TYPE OF UNUSUAL STRUCTURE. USE THE MEASUREMENT BOOKLET TO MARK AND, IF NECESSARY, SKETCH THE SHAPE OF EACH FLOOR AND MANUALLY RECORD ALL MEASUREMENTS.

M-2 SHAPE1FLRA INTERVIEWER INSTRUCTION: SHOW CARD 40. Please look at Card 40. Thinking about the main or first floor of your home, let's work together to find which of these shapes best describes the shape of the living space [If GARGLOC=2: including the garage] on the main or first floor?

Square or Rectangle .1

T-shaped (2 Squares or Rectangles)........................... 2
L-shaped (2 Squares or Rectangles ............................ 3
Some other shape ....................................................... 4

M-3 [If STORIES=20, 31,40 or NAPTFLRS=2,3] SHAPE2FLR Is the shape of the second floor of this housing unit the same as the first floor?

Yes 1

No................................................... 0

M-3a [If SHAPE2FLR=1] SIZE2FLR Is the size of the second floor of this housing unit the same as the first floor?

Yes ................................................ 1
No 0

M-3b [If SHAPE2FLR=0 or SIZE2FLR=0] SHAPE2FLRA INTERVIEWER INSTRUCTION: SHOW CARD 40. Please look at Card 40. Thinking about the second floor of your home, which of the shapes best describes the shape of the living space on the second floor?

Square or Rectangle1
T-shaped (2 Squares or Rectangles) ..... 2
L-shaped (2 Squares or Rectangles) .....  3
Some other shape ..... 4
Not applicable ..... 9

M-4 [If STORIES=31,40 or NAPTFLRS=3] SHAPE3FLR Is the shape of the third floor of this housing unit the same as the second floor?
\(\qquad\)
No 0

M-4a [If SHAPE3FLR=1] SIZE3FLR Is the size of the third floor of this housing unit the same as the second floor?
\(\qquad\)
No 0
\(\mathrm{M}-4 \mathrm{~b}\) [If SHAPE3FLR=0 or SIZE3FLR=0] SHAPE3FLRA INTERVIEWER INSTRUCTION: SHOW CARD 40. Please look at Card 40. Thinking about the third floor of your home, which of these shapes best describes the shape of the living space on the third floor?

Square or Rectangle .................................................... 1
T-shaped (2 Squares or Rectangles)........................... 2
L-shaped (2 Squares or Rectangles)............................ 3
Some other shape ....................................................... 4
Not applicable ............................................................. 9

M-5 [If ATTICFIN=1 and ATTICHEAT=1,2 and (TYPEHUQ=2,3 or ATTICUSE=1,2)] SHAPEATTIC Is the shape of the attic of this housing unit the same as the floor under it?

Yes ................................................. 1
No................................................... 0

M-5a [If SHAPEATTIC=1] SIZEATTIC Is the size of the attic of this housing unit the same as the floor under it?

Yes ................................................ 1
No .................................................. 0
M-5b [If SHAPEATTIC=0 or SIZEATTIC=0] SHAPEATTICA INTERVIEWER INSTRUCTION: SHOW CARD 40. Please look at Card 40. Thinking about the attic of your home, which of these shapes describes the shape of the living space in the attic?

INTERVIEWER INSTRUCTION: IF THIS IS AN APARTMENT IN A 2-4 UNIT BUILDING, REMIND THE RESPONDENT TO INCLUDE ONLY THE SHAPE THAT THEY HAVE EXCLUSIVE USE OF.

Square or Rectangle .................................................... 1
T-shaped (2 Squares or Rectangles)........................... 2
L-shaped (2 Squares or Rectangles)........................... 3
Some other shape ........................................................ 4
Not applicable............................................................. 9

M-6 [If TYPEHUQ=2, 3 or BASEUSE=1,2] SHAPEBASE Is the shape of the basement of this housing unit the same as the floor directly above it?

Yes ................................................ 1
No. 0

M-6a [If SHAPEBASE=1] SIZEBASE Is the size of the basement of this housing unit the same as the floor directly above it?

Yes ................................................. 1
No .................................................. 0
M-6b [If SHAPEBASE=0 or SIZEBASE=0] SHAPEBASEA INTERVIEWER INSTRUCTION: SHOW CARD 40. Please look at Card 40. Thinking about the basement of your home [If GARGLOC=1: including the garage), which of these shapes best describes the shape of the basement?

INTERVIEWER INSTRUCTION: IF THIS IS AN APARTMENT IN A 2-4 UNIT BUILDING, REMIND

Square or Rectangle ................................................... 1
T-shaped (2 Squares or Rectangles)........................... 2
L-shaped (2 Squares or Rectangles)............................ 3
Some other shape ....................................................... 4
Not applicable............................................................ 9

M-7 MEASURE To understand the usage of energy in your home/apartment, we need to know its exact size in square feet. [If SQFTEST>0: Even though you have given me your best estimate] With your permission, I would like to measure your home.

Measurements follow 1

Respondent refused ......................... 7
Other ................................................ 2
INTERVIEWER INSTRUCTIONS: IF THE RESPONDENT REFUSED TO LET YOU MEASURE THE HOUSING UNIT, THANK HIM/HER AND CONCLUDE THE INTERVIEW. IF NAPTFLRS>3 OR STORIES \(=50\), THIS HOUSING UNIT IS SOME TYPE OF UNUSUAL STRUCTURE. USE THE MEASUREMENT BOOKLET TO MARK AND, IF NECESSARY, SKETCH THE SHAPE OF EACH FLOOR AND MANUALLY RECORD ALL MEASUREMENTS.

\section*{Measurement Instructions}

For all housing units: The main or first floor of this housing unit (if applicable, including the garage) is to be measured.
In the Measurements Booklet on page 7 for the Main/First Floor, check the box for:
(Shape of Floor)
If the floor is "Some Other Shape": Record all information for this floor inside the Measurements Booklet.

If SHAPE2FLR=0 or SIZE2FLR=0: This housing unit has a second floor that is to be measured.
In the Measurements Booklet, for the Second Floor, check the boxes for:
Measure
(Shape of Floor)
If the floor is Some Other Shape: Record all information for this floor inside the Measurements Booklet.

If SHAPE3FLR=0 or SIZE3FLR=0: This housing unit has a third floor that is to be measured.
In the Measurements Booklet on page 7, for the Third Floor, check the boxes for:
Measure
(Shape of Floor)
If the floor is Some Other Shape: Record all information for this floor inside the Measurements Booklet.

If SHAPEATTIC \(=0\) or SHAPEATTIC \(=0\) : This housing unit has an attic that is to be measured.
In the Measurements Booklet on page 7, for the Attic, check the boxes for:
Measure
(Shape of Floor)
If the floor is Some Other Shape: Record all information for this floor inside the Measurements Booklet.

If SHAPEBASE=0 or SHAPEBASE=0: This basement of this housing unit (if applicable, including the garage) is to be measured.

In the Measurements Booklet on page 7, for the Basement, check the boxes for:
Measure
(Shape of Floor)
If the floor is Some Other Shape: Record all information for this floor inside the Measurements Booklet.

If NAPTFLRS \(>3\) or STORIES=32: This housing unit has more than 3 floors (in addition to any attics or basements). You are to measure all the floors in this housing unit.

For the first four floors (and any attics or basements), use the available pages in the yellow Measurements Booklet to sketch the shape of the floor and to record your measurements.

For each additional floor, use a separate piece of paper to sketch the shape of the floor and to record your measurements. Securely attach these papers to the yellow Measurements Booklet

M-8a [If SHAPE1FLRA=1] FLR1L1 FLR1W1 INTERVIEWER INSTRUCTION: MEASURE THE LENGTH AND WIDTH OF THE FIRST/MAIN FLOOR. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.


M-8b [If SHAPE1FLRA=2,3] FLR1L1 FLR1W1 FLR1L2 FLR1W2 INTERVIEWER INSTRUCTION: DIVIDE THE FIRST/MAIN FLOOR INTO TWO SQUARES OR RECTANGLES AND MEASURE THE LENGTH AND WIDTH OF EACH ONE. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.
\begin{tabular}{|c|c|}
\hline Enter the length of the first area here. \(\qquad\) & Enter the width of the first area here \(\qquad\) \\
\hline Enter the length of the second area here \(\qquad\) & Enter the width of the second area here. \\
\hline
\end{tabular}

M-8c [If FLR1L1 or FLR1W1 or FLR1L2 or FLR1W2>0] MEAS1FLR INTERVIEWER INSTRUCTION: RECORD WHERE THE FIRST/MAIN FLOOR MEASUREMENTS WERE TAKEN.

Outside the unit ......................................................... 1
Inside the unit............................................................ 2
Other (Specify__ )............................... 3
Not measured ............................................................. 4
Not applicable ........................................................... 9

M-9a [If (SHAPE2FLR=0 or SIZE2FLR=0) and SHAPE2FLRA=1] FLR2L1 FLR2W1 INTERVIEWER INSTRUCTION: MEASURE THE LENGTH AND WIDTH OF THE SECOND FLOOR. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.

Enter the length here ...................... \(\square\) Enter the width here....................... \(\square\)
M-9b [If (SHAPE2FLR=0 or SIZE2FLR=0) and SHAPE2FLRA=2,3] FLR2L1 FLR2W1 FLR2L2 FLR2W2
INTERVIEWER INSTRUCTION: DIVIDE THE SECOND FLOOR INTO TWO SQUARES OR RECTANGLES AND MEASURE THE LENGTH AND WIDTH OF EACH ONE. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.
\begin{tabular}{l} 
Enter the length of the \\
first area here..................................
\end{tabular}
\begin{tabular}{l}
\(\square\)
\end{tabular} \begin{tabular}{l} 
Enter the width of the \\
first area here ..................................
\end{tabular}
\begin{tabular}{l} 
Enter the length of the \\
second area here .............................
\end{tabular}\(\quad\)\begin{tabular}{l} 
Enter the width of the \\
second area here.............................
\end{tabular}

M-9c [If FLR2L1 or FLR2W1 or FLR2L2 or FLR2W2>0] MEAS2FLR INTERVIEWER INSTRUCTION: RECORD WHERE THE SECOND FLOOR MEASUREMENTS WERE TAKEN.
```

Outside the unit ................................................... }
Inside the unit....................................................... }
Other (Specify___)............................... }
Not measured ....................................................... }
Not applicable ...................................................... }

```

M-10a [If (SHAPE3FLR=0 or SIZE3FLR=0) and SHAPE3FLRA=1] FLR3L1 FLR3W1 INTERVIEWER INSTRUCTION: MEASURE THE LENGTH AND WIDTH OF THE THIRD FLOOR. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.

\(\qquad\) Enter the width here

M-10b [If (SHAPE3FLR=0 or SIZE3FLR=0) and SHAPE3FLRA=2,3] FLR3L1 FLR3W1 FLR3L2 FLR3W2 INTERVIEWER INSTRUCTION: DIVIDE THE THIRD FLOOR INTO TWO SQUARES OR RECTANGLES AND MEASURE THE LENGTH AND WIDTH OF EACH ONE. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.
\begin{tabular}{|c|c|}
\hline Enter the length of the first area here. & Enter the width of the first area here \(\qquad\) \\
\hline Enter the length of the second area here. \(\qquad\) & Enter the width of the second area here. \\
\hline
\end{tabular}

M-10c [If FLR3L1 or FLR3W1 or FLR3L2 or FLR3W2>0] MEAS3FLR INTERVIEWER INSTRUCTION: RECORD WHERE THE THIRD FLOOR MEASUREMENTS WERE TAKEN.

Outside the unit . .1

Inside the unit............................................................ 2
Other (Specify__ .................................. 3
Not measured ............................................................. 4
Not applicable ........................................................... 9

M-11a [If (SHAPEATTIC=0 or SIZEATTIC=0) and SHAPEATTICA=1] FLRAL1 FLRAW1 INTERVIEWER INSTRUCTION: MEASURE THE LENGTH AND WIDTH OF THE ATTIC. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.

Enter the length here
 Enter the width here


M-11b [If (SHAPEATTIC=0 or SIZEATTIC=0) and SHAPEATTICA=2,3] FLRAL1 FLRAW1 FLRAL2 FLRAW2 INTERVIEWER INSTRUCTION: DIVIDE THE ATTIC INTO TWO SQUARES OR RECTANGLES AND MEASURE THE LENGTH AND WIDTH OF EACH ONE. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.


M-11c [If FLRAL1 or FLRAW1 or FLRAL2 or FLRAW2>0] MEASATTIC INTERVIEWER INSTRUCTION: RECORD WHERE THE ATTIC MEASUREMENTS WERE TAKEN.
\[
\begin{aligned}
& \text { Outside the unit......................................................... } 1 \\
& \text { Inside the unit....................................................................... } 3 \\
& \text { Other (Specify -............................................................. } 4 \\
& \text { Not measured } 4 \\
& \text { Not applicable.................................................. } 9
\end{aligned}
\]

M-12a [If (SHAPEBASE=0 or SIZEBASE=0) and SHAPEBASEA=1] FLRBL1 FLRBW1 INTERVIEWER INSTRUCTION: MEASURE THE LENGTH AND WIDTH OF THE BASEMENT. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.

Enter the length here \(\qquad\)
\(\square\) Enter the width here \(\qquad\) \(\square\)

M-12b [If (SHAPEBASE=0 or SIZEBASE=0) and SHAPE2FLRA=2,3] FLRBL1 FLRBW1 FLRBL2 FLRBW2 INTERVIEWER INSTRUCTION: DIVIDE THE BASEMENT INTO TWO SQUARES OR RECTANGLES AND MEASURE THE LENGTH AND WIDTH OF EACH ONE. RECORD THE MEASUREMENTS IN THE SPACES BELOW. ROUND THE LENGTH AND WIDTH TO THE NEAREST WHOLE FOOT.
\begin{tabular}{l} 
Enter the length of the \\
first area here..................................
\end{tabular}
\begin{tabular}{ll} 
Enter the length of the \\
Eecond area here ..............................
\end{tabular}
\begin{tabular}{l} 
Enter the width of the \\
first area here .................................
\end{tabular}
\begin{tabular}{l} 
Enter the width of the \\
second area here.............................
\end{tabular}

M-12c [If FLRBL1 or FLRBW1 or FLRBL2 or FLRBW2>0] MEASBASE INTERVIEWER INSTRUCTION: RECORD WHERE THE BASEMENT MEASUREMENTS WERE TAKEN.

Outside the unit ......................................................... 1
Inside the unit............................................................. 2
Other (Specify__ ).................................. 3
Not measured ............................................................ 4
Not applicable ........................................................... 9
INTERVIEWER INSTRUCTION: IF NAPTFLRS \(>3\) or STORIES \(>40\) THIS HOUSING UNIT HAS MORE THAN 3 FLOORS (IN ADDITION TO ANY ATTICS OR BASEMENTS). THERE IS NO MORE ROOM IN THE CAPI SYSTEM TO ENTER THE MEASUREMENTS FOR THESE OTHER FLOORS. BE SURE TO SECURELY ATTACH THE PAPERS THAT INCLUDE THE SKETCHES OF THE SHAPE AND THE MEASUREMENTS OF THESE ADDITIONAL FLOORS TO THE YELLOW MEASUREMENTS BOOKLET. THE DATA PROCESSING DEPARTMENT WILL ENTER THIS INFORMATION FOR YOU.

\section*{Section N: SCANNING OF FUEL BILLS}

N -1a
[If ELBILLTOSCAN=1 or NGBILLTOSCAN=1 or LPGBILLTOSCAN=1 or LPGBILLTOSCAN2=1 or FOBILLTOSCAN=1 or FOBILLTOSCAN2=1 or KEROBILLTOSCAN=1 or KEROBILLTOSCAN2=1] INTERVIEWER INSTRUCTION: BASED ON THE INFORMATION YOU ENTERED ABOUT FUEL BILLS, THE RESPONDENT HAS GIVEN YOU BILLS TO SCAN. NEXT, YOU ARE TO SAY GOOD-BYE THEN SCAN THE BILLS. That is the last question I have. Thank you for your time and cooperation. Before I leave I will want to take a moment to scan into my computer the fuel bills that you gave me earlier. Have a pleasant day/evening.

N-1b [If ELBILLTOSCAN=0 and NGBILLTOSCAN=0 and LPGBILLTOSCAN=0 and LPGBILLTOSCAN2=0 and FOBILLTOSCAN \(=0\) and FOBILLTOSCAN2 \(=0\) and KEROBILLTOSCAN \(=0\) and KEROBILLTOSCAN2=0] INTERVIEWER INSTRUCTION: BASED ON THE INFORMATION YOU ENTERED ABOUT FUEL BILLS, THE RESPONDENT HAS NOT GIVEN YOU ANY BILLS TO SCAN. YOU ARE NOW TO CONCLUDE THE INTERVIEW. That is the last question I have. Thank you for your time and cooperation. Have a pleasant day/evening.

\title{
U.S. DEPARTMENT OF ENERGY 2009 RESIDENTIAL ENERGY CONSUMPTION SURVEY
}

\section*{Authorization Form}


I hereby give permission to the electric, natural gas, fuel oil, and propane (bottled gas including LPG) company or companies that provide energy to me to provide information to the designated agent of the U.S. Department of Energy for confidential use in connection with their survey for the U.S. Department of Energy.

This authorization covers the following data for the period from October 1, 2008, through March 31, 2010:
1) the total amount of fuels used by my household
2) the total price charged for fuels used by my household

Companies are authorized to provide this information by monthly periods or by delivery date, whichever applies. An electronic copy of this authorization may be accepted with the same authority as the original.

Signature (1): \(\qquad\) Date: \(\qquad\)

Printed Name: \(\qquad\)

Signature (2): \(\qquad\) Date: \(\qquad\)

Printed Name: \(\qquad\)
U.S. Department of Energy

Energy Information Administration

\title{
2009 Residential Energy Consumption Survey
}

Nationwide Survey on Household Energy Use

\section*{Rental Agents, Landlords, and Apartment Managers Questionnaire}

\section*{INTRODUCTION TO INTERVIEW}

Hello, I am \(\qquad\) from [CONTRACTOR]. We are conducting a study for the United States Department of Energy about energy consumption in homes in the U.S.

A tenant/Tenants in \(\qquad\) [PRELOAD UNIT NUMBER(S)] has/have provided some information about the energy use for their home. During this interview we will ask you questions about the energy use in their household(s) for verification, as well as a few questions about the entire building. Although your participation is not required, we hope you will participate in this important study of energy usage. All of the responses you give me will be kept strictly confidential and data will be used for statistical purposes only.

We estimate the reporting burden for this collection of information to average 18 minutes per interview. Any comments you may have regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, should be sent to the Energy Information Administration, Statistics and Methods Group and to the Office of Information and Regulatory Affairs, Office of Management and Budget.
[PRELOAD NUMBER OF UNITS]: RANUMUNIT
[PRELOAD UNIT NUMBER 1]: RAUNIT1
[PRELOAD UNIT NUMBER 2]: RAUNIT2
[PRELOAD UNIT NUMBER 3]: RAUNIT3
[PRELOAD UNIT NUMBER 4]: RAUNIT4
[PRELOAD UNIT NUMBER 5]: RAUNIT5
[PRELOAD UNIT NUMBER 6]: RAUNIT6
[PRELOAD THE ADDRESS OF THE BUILDING A]: RABUILDADDRESSA
[PRELOAD THE ADDRESS OF THE BUILDING B]: RABUILDADDRESSB
[PRELOAD THE ADDRESS OF THE BUILDING C]: RABUILDADDRESSC
[PRELOAD THE ADDRESS OF THE BUILDING D]: RABUILDADDRESSD
[PRELOAD THE ADDRESS OF THE BUILDING E]: RABUILDADDRESSE
[PRELOAD THE ADDRESS OF THE BUILDING F]: RABUILDADDRESSF
[PRELOAD UNITS IN BLDG A] (UNIT1-6): RABLDUNITA
[PRELOAD UNITS IN BLDG B] (UNIT1-6): RABLDUNITB
[PRELOAD UNITS IN BLDG C] (UNIT1-6): RABLDUNITC
[PRELOAD UNITS IN BLDG D] (UNIT1-6): RABLDUNITD
[PRELOAD UNITS IN BLDG E] (UNIT1-6): RABLDUNITE
[PRELOAD UNITS IN BLDG F] (UNIT1-6): RABLDUNITF
: Let's begin with some general questions about unit(s) \({ }^{\wedge}\) RABLDUNITA and the building at
\({ }^{\wedge}\) RABUILDADDRESSA.
INTERVIEWER: PRESS "ENTER" TO CONTINUE.
1) RANUMFLRSA

How many floors, or stories, are in the building at \({ }^{\wedge}\) RABUILDADDRESSA? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMFLRSA > 50] "I have recorded that this building has \({ }^{\wedge}\) RANUMFLRSA floors, which is unusually large. Is this number correct?"
2) RANUMAPTSA

How many separate housing units are in this building?
Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMAPTSA > 300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSA units in this building. Is this number correct?" SIGNAL [IF RANUMAPTSA/RANUMFLRSA > 30] "I have recorded that there are \({ }^{\wedge}\) RANUMFLRSA floors and \({ }^{\wedge}\) RANUMAPTSA apartments in this building. That would mean that the average floor in this building has \({ }^{\wedge}\) RANUMAPTSA/RANUMFLRSA apartments. Is this correct?"
3) RAYEARMADEA

In what year was the building at \({ }^{\wedge}\) RABUILDADDRESSA built?
Answer must be in the range from 1850 up to 2010:
4) [If RAYEARMADEA = 2010] TERMINATEAA

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSA was built in 2010. Is this correct?
1 Yes
0 No
[If TERMINATEAA = 1] TERMINATEBA
Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITA in this building is (are) not eligible for this survey.
5) [If RAYEARMADEA \(=\) DK or RF or TERMINATEAA \(=0\) ] RAYEARCATA

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
04 1960-1969
05 1970-1979
06 1980-1984
07 1985-1989
08 1990-1994
09 1995-1999
10 2000-2005
112006
122007
132008
142009
6) [If RANUMAPTSA > 2] RACOMMONA

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYA]
2 Commercial space, including stores or restaurants [RACOMMERCIALA]
3 Apartment rental office or other large office space [RAOFFICEA]
4 Laundry room [RALAUNDRYA]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYMA]
6 Conference rooms or party space [RACONFERENCEA]
7) [If RANUMAPTSA > 1] RABLDSQFTA

What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSA? Your best estimate is fine.
Answer must be in the range from 1 up to 9,999,999:
SIGNAL [IF RABLDSQFTA < 1000] 'I have recorded that this building is \({ }^{\wedge}\) RABLDSQFTA square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSA, not just unit(s) \({ }^{\wedge}\) RABLDUNITA." SIGNAL [IF RABLDSQFTA > 50,000] "I have recorded that this building is
\({ }^{\wedge}\) RABLDSQFTA square feet. This is quite a large building. Please confirm if this is correct."
8) [If RABLDSQFTA = DK or RF] RABLDSQFTCATA

INTERVIEWER: USE SHOW CARD 2
Which of the following categories best describes the total floorspace in the building at
^RABUILDADDRESSA?
Is it...
1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
RECS (1905-0092)

550,000 to 100,000 square feet
6100,000 or more square feet
9) [If RABLDUNITB \(<>\) EMPTY] RANUMFLRSB

How many floors, or stories, are in the building at ^ RABUILDADDRESSB, in which unit? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999 :
SIGNAL [If RANUMFLRSB > 50] "I have recorded that this building has \({ }^{\wedge}\) RANUMFLRSB floors, which is unusually large. Is this number correct?"
10) [If RABLDUNITB <> EMPTY] RANUMAPTSB

How many separate housing units are in this building?
Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMAPTSB >300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSB units in this building. Is this number correct?"
SIGNAL [IF RANUMAPTSB/RANUMFLRSB > 30] "I have recorded that there are \({ }^{\wedge}\) RANUMFLRSB floors and \({ }^{\wedge}\) RANUMAPTSB apartments in this building. That would mean that the average floor in this building has \({ }^{\wedge}\) RANUMAPTSB/RANUMFLRSB apartments. Is this correct?"
11) [If RABLDUNITB \(>\) EMPTY] RAYEARMADEB

In what year was the building at \({ }^{\wedge}\) RABUILDADDRESSB built?
Answer must be in the range from 1850 up to 2010:
12) [If RAYEARMADEB \(=\) 2010] TERMINATEAB

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSB was built in 2010. Is this correct?
1 Yes
0 No
[If TERMINATEAB \(=1\) ] TERMINATEBB
Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITB in this building is (are) not eligible for this survey.
13) [If RAYEARMADEB \(=\mathrm{DK}\) or RF or TERMINATEAB \(=0\) ] RAYEARCATB

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
04 1960-1969
05 1970-1979
06 1980-1984
07 1985-1989
08 1990-1994
09 1995-1999
10 2000-2005
112006
122007
132008
14) [If RANUMAPTSB > 2] RACOMMONB

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYB]
2 Commercial space, including stores or restaurants [RACOMMERCIALB]
3 Apartment rental office or other large office space [RAOFFICEB]
4 Laundry room [RALAUNDRYB]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYMB]
6 Conference rooms or party space [RACONFERENCEB]
15) [If RANUMAPTSB > 1] RABLDSQFTB

What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSB? Your best estimate is fine.
Answer must be in the range from 1 up to \(9,999,999\) :
SIGNAL [IF RABLDSQFTB < 1000] "I have recorded that this building is \({ }^{\wedge}\) RABLDSQFTB square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSB, not just units \({ }^{\wedge}\) RABLDUNITB." SIGNAL [IF RABLDSQFTB > 50,000] " \(I\) have recorded that this building is
\({ }^{\wedge}\) RABLDSQFTB square feet. This is quite a large building. Please confirm if this is correct."
16) [If RABLDSQFTB \(=\mathrm{DK}\) or RF] RABLDSQFTCATB

INTERVIEWER: USE SHOW CARD 2
Which of the following categories best describes the total floorspace in the building at
\({ }^{\wedge}\) RABUILDADDRESSB?
Is it...
1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
550,000 to 100,000 square feet
6100,000 or more square feet
17) [If RABLDUNITC \(<>\) EMPTY] RANUMFLRSC

How many floors, or stories, are in the building at \({ }^{\wedge}\) RABUILDADDRESSC, in which unit? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMFLRSC > 50] "I have recorded that this building has \({ }^{\wedge}\) RANUMFLRSC floors, which is unusually large. Is this number correct?"
18) [If RABLDUNITC <> EMPTY] RANUMAPTSC

How many separate housing units are in this building?
Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMAPTSC > 300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSC units in this building. Is this number correct?"
SIGNAL [IF RANUMAPTSC/RANUMFLRSC > 30] "I have recorded that there are \({ }^{\wedge}\) RANUMFLRSC floors and \({ }^{\wedge}\) RANUMAPTSC apartments in this building. That would mean that the average floor in this building has \({ }^{\wedge}\) RANUMAPTSC/RANUMFLRSC apartments. Is this correct?"
[If RABLDUNITC \(<\) EMPTY] RAYEARMADEC
In what year was the building at \({ }^{\wedge}\) RABUILDADDRESSC built?
Answer must be in the range from 1850 up to 2010: \(\qquad\)
20) [If RAYEARMADEC = 2010] TERMINATEAC

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSC was built in 2010. Is this correct? 1 Yes 0 No

\section*{[If TERMINATEAC = 1] TERMINATEBC}

Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITC in this building is (are) not eligible for this survey.
21) [If RAYEARMADEC \(=\mathrm{DK}\) or RF or TERMINATEAC \(=0\) ] RAYEARCATC

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
04 1960-1969
05 1970-1979
06 1980-1984
07 1985-1989
08 1990-1994
09 1995-1999
10 2000-2005
112006
122007
132008
142009
22) [If RANUMAPTSC > 2] RACOMMONC

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYC]
2 Commercial space, including stores or restaurants [RACOMMERCIALC]
3 Apartment rental office or other large office space [RAOFFICEC]
4 Laundry room [RALAUNDRYC]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYMC]
6 Conference rooms or party space [RACONFERENCEC]
23) [If RANUMAPTSC > 1] RABLDSQFTC What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSC? Your best estimate is fine.

Answer must be in the range from 1 up to \(9,999,999\) :
SIGNAL [IF RABLDSQFTC < 1000] 'I have recorded that this building is \({ }^{\wedge}\) RABLDSQFTC square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at ^RABUILDADDRESSC, not just units ^RABLDUNITC." SIGNAL [IF RABLDSQFT3 \(>50,000\) ] "I have recorded that this building is \({ }^{\wedge}\) RABLDSQFTC square feet. This is quite a large building. Please confirm if this is correct."

Which of the following categories best describes the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSC?
Is it...
1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
550,000 to 100,000 square feet
6100,000 or more square feet
25) [If RABLDUNITD \(<>\) EMPTY] RANUMFLRSD

How many floors, or stories, are in the building at \({ }^{\wedge}\) RABUILDADDRESSD, in which unit? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMFLRSD > 50] "I have recorded that this building has ^RANUMFLRSD floors, which is unusually large. Is this number correct?"
26)
[If RABLDUNITD <> EMPTY] RANUMAPTSD
How many separate housing units are in this building?
Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMAPTSD > 300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSD units in this building. Is this number correct?"
SIGNAL [IF RANUMAPTSD/RANUMFLRSD > 30] 'I have recorded that there are \({ }^{\wedge}\) RANUMFLRSD floors and \({ }^{\wedge}\) RANUMAPTSD apartments in this building. That would mean that the average floor in this building has \({ }^{\wedge}\) RANUMAPTSD/RANUMFLRSD apartments. Is this correct?"
27) [If RABLDUNITD \(>\) EMPTY] RAYEARMADED

In what year was the building at \({ }^{\wedge}\) RABUILDADDRESSD built?
Answer must be in the range from 1850 up to 2010: \(\qquad\)
28) [If RAYEARMADED = 2010] TERMINATEAD

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSD was built in 2010. Is this correct?
1 Yes
0 No
[If TERMINATEAD = 1] TERMINATEBD
Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITD in this building is (are) not eligible for this survey.
29) [If RAYEARMADED \(=\mathrm{DK}\) or RF or TERMINATEAD \(=0\) ] RAYEARCATD

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
30) [If RANUMAPTSD > 2] RACOMMOND

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYD]
2 Commercial space, including stores or restaurants [RACOMMERCIALD]
3 Apartment rental office or other large office space [RAOFFICED]
4 Laundry room [RALAUNDRYD]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYMD]
6 Conference rooms or party space [RACONFERENCED]
31) [If RANUMAPTSD > 1] RABLDSQFTD

What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSD? Your best estimate is fine.
Answer must be in the range from 1 up to \(9,999,999\) :
SIGNAL [IF RABLDSQFTD < 1000] "I have recorded that this building is ^RABLDSQFTD square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSD, not just units \({ }^{\wedge}\) RABLDUNITD." SIGNAL [IF RABLDSQFTD > 50,000] "I have recorded that this building is
\({ }^{\wedge}\) RABLDSQFTD square feet. This is quite a large building. Please confirm if this is correct."
32) [If RABLDSQFTD \(=\mathrm{DK}\) or RF] RABLDSQFTCATD

INTERVIEWER: USE SHOW CARD 2
Which of the following categories best describes the total floorspace in the building at ^RABUILDADDRESSD? Is it...

1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
550,000 to 100,000 square feet
6100,000 or more square feet
33) [If RABLDUNITE \(>\) EMPTY] RANUMFLRSE

How many floors, or stories, are in the building at \({ }^{\wedge}\) RABUILDADDRESSE, in which unit? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMFLRSE > 50] "I have recorded that this building has \({ }^{\wedge}\) RANUMFLRSE floors, which is unusually large. Is this number correct?"

How many separate housing units are in this building?
Answer must be in the range from 1 up to 999: \(\qquad\)
SIGNAL [If RANUMAPTSE > 300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSE units in this building. Is this number correct?"
SIGNAL [IF RANUMAPTSE/RANUMFLRSE > 30] "I have recorded that there are
\({ }^{\wedge}\) RANUMFLRSE floors and \({ }^{\wedge}\) RANUMAPTSE apartments in this building. That would mean that the average floor in this building has RANUMAPTSE/RANUMFLRSE apartments. Is this correct?"
35) [If RABLDUNITE \(>\) EMPTY] RAYEARMADEE

In what year was the building at \({ }^{\wedge}\) RABUILDADDRESSE built?
Answer must be in the range from 1850 up to 2010:
36) [If RAYEARMADEE = 2010] TERMINATEAE

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSE was built in 2010. Is this correct?
1 Yes
0 No
[If TERMINATEAE \(=1\) ] TERMINATEBE
Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITE in this building is (are) not eligible for this survey.
37) [If RAYEARMADEE \(=\mathrm{DK}\) or RF or TERMINATEAE \(=0\) ] RAYEARCATE

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
04 1960-1969
05 1970-1979
06 1980-1984
07 1985-1989
08 1990-1994
09 1995-1999
10 2000-2005
112006
122007
132008
142009
38) [If RANUMAPTSE > 2] RACOMMONE

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYE]
2 Commercial space, including stores or restaurants [RACOMMERCIALE]
3 Apartment rental office or other large office space [RAOFFICEE]
4 Laundry room [RALAUNDRYE]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYME]
6 Conference rooms or party space [RACONFERENCEE]
39) [If RANUMAPTSE > 1] RABLDSQFTE

What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSE? Your best estimate is fine. Answer must be in the range from 1 up to \(9,999,999\) :

SIGNAL [IF RABLDSQFTE < 1000] "I have recorded that this building is ^RABLDSQFTE square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at ^RABUILDADDRESSE, not just units ^RABLDUNITE." SIGNAL [IF RABLDSQFTE > 50,000] "I have recorded that this building is
\({ }^{\wedge}\) RABLDSQFTE square feet. This is quite a large building. Please confirm if this is correct."
40) [If RABLDSQFTE \(=\) DK or RF] RABLDSQFTCATE

INTERVIEWER: USE SHOW CARD 2
Which of the following categories best describes the total floorspace in the building at
\({ }^{\wedge}\) RABUILDADDRESSE?
Is it...
1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
550,000 to 100,000 square feet
6100,000 or more square feet
41) [If RABLDUNITF \(<>\) EMPTY] RANUMFLRSF

How many floors, or stories, are in the building at \({ }^{\wedge}\) RABUILDADDRESSF, in which unit? Do not include basements, parking levels, or attics.

Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMFLRS6 > 50] "I have recorded that this building has \({ }^{\wedge}\) RANUMFLRSF floors, which is unusually large. Is this number correct?"
42) [If RABLDUNITF \(<>\) EMPTY] RANUMAPTSF

How many separate housing units are in this building?
Answer must be in the range from 1 up to 999:
SIGNAL [If RANUMAPTSF > 300] "I have recorded that there are \({ }^{\wedge}\) RANUMAPTSF units in this building. Is this number correct?"
SIGNAL [IF RANUMAPTSF/RANUMFLRSF > 30] "I have recorded that there are \({ }^{\wedge}\) RANUMFLRSF floors and \({ }^{\wedge}\) RANUMAPTSF apartments in this building. That would mean that the average floor in this building has RANUMAPTSF/RANUMFLRSF apartments. Is this correct?"
43) [If RABLDUNITF \(<>\) EMPTY] RAYEARMADEF

In what year was the building at ^RABUILDADDRESSF built?
Answer must be in the range from 1850 up to 2010:
44) [If RAYEARMADEF = 2010] TERMINATEAF

I have recorded that the building at \({ }^{\wedge}\) RABUILDADDRESSF was built in 2010. Is this correct?
1 Yes
0 No
[If TERMINATEAF = 1] TERMINATEBF
Since this building was not ready for occupancy from January 1, 2009 to December 31, 2009, unit(s)
\(\wedge\) RABLDUNITF in this building is (are) not eligible for this survey.
45) [If RAYEARMADEF \(=\mathrm{DK}\) or RF or TERMINATEAF \(=0\) ] RAYEARCATF

INTERVIEWER: USE SHOW CARD 1
Please give your best estimate. Was it...
01 Before 1940
02 1940-1949
03 1950-1959
04 1960-1969
05 1970-1979
06 1980-1984
07 1985-1989
08 1990-1994
09 1995-1999
10 2000-2005
112006
122007
132008
142009
46) [If RANUMAPTSF > 2] RACOMMONF

Do the common areas in this building contain any of the following types of area? Check all that apply.

1 Lobby/Reception Area [RALOBBYF]
2 Commercial space, including stores or restaurants [RACOMMERCIALF]
3 Apartment rental office or other large office space [RAOFFICEF]
4 Laundry room [RALAUNDRYF]
\(5 \mathrm{Gym} /\) Swimming pool/Sauna areas [RAGYMF]
6 Conference rooms or party space [RACONFERENCEF]
47) [If RANUMAPTSF > 1] RABLDSQFTF

What is the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSF? Your best estimate is fine.
Answer must be in the range from 1 up to 9,999,999:
SIGNAL [IF RABLDSQFTF < 1000] 'I have recorded that this building is \({ }^{\wedge}\) RABLDSQFTF square feet. This is quite a small building. Please confirm that you are including all of the floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSF, not just units \({ }^{\wedge}\) RABLDUNITF." SIGNAL [IF RABLDSQFTF > 50,000] "I have recorded that this building is
\({ }^{\wedge}\) RABLDSQFTF square feet. This is quite a large building. Please confirm if this is correct."
48) [If RABLDSQFTF \(=\mathrm{DK}\) or RF] RABLDSQFTCATF

INTERVIEWER: USE SHOW CARD 2
Which of the following categories best describes the total floorspace in the building at \({ }^{\wedge}\) RABUILDADDRESSF?
Is it...
1 Fewer than 5,000 square feet
25,000 to 10,000 square feet
310,000 to 25,000 square feet
425,000 to 50,000 square feet
550,000 to 100,000 square feet
6100,000 or more square feet

Unit 1: [If UNIT1 in RABLDUNITA] RANUMFLRS1 = RANUMFLRSA , RANUMAPTS1 =
```

RANUMAPTSA , RAYEARMADE1 = RAYEARMADEA , RAYEARCAT1 = RAYEARCATA ,
RACOMMERCIAL1 = RACOMMERCIALA , RAOFFICE1 = RAOFFICEA , RALAUNDRY1 =
RALAUNDRYA , RAGYM1 = RAGYMA , RACONFERENCE1 = RACONFERENCEA , RABLDSQFT1 =
RABLDSQFTA , RABLDSQFTCAT1 = RABLDSQFTCATA
[Else] [If UNIT1 in RABLDUNITB] RANUMFLRS1 = RANUMFLRSB , RANUMAPTS1 = RANUMAPTSB
, RAYEARMADE1 = RAYEARMADEB , RAYEARCAT1 = RAYEARCATB , RACOMMERCIAL1 =
RACOMMERCIALB , RAOFFICE1 = RAOFFICEB , RALAUNDRY1 = RALAUNDRYB , RAGYM1 =
RAGYMB , RACONFERENCE1 = RACONFERENCEB , RABLDSQFT1 = RABLDSQFTB ,
RABLDSQFTCAT1 = RABLDSQFTCATB
[Else] [If UNIT1 in RABLDUNITC] RANUMFLRS1 = RANUMFLRSC , RANUMAPTS1 = RANUMAPTSC

```
[If UNIT2-6 <> EMPTY] Unit 2-6: See Unit 1 logic above

\section*{49) RASQFTEST1}

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT1? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999 :
SIGNAL [IF RASQFTEST1 \(<=100\) ] 'I have recorded that unit \({ }^{\wedge}\) RAUNIT1 is
\({ }^{\wedge}\) RASQFTEST1 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit ^RAUNIT1."
SIGNAL [IF RASQFTEST1 > 5000] "I have recorded that unit \({ }^{\wedge}\) RAUNIT1 is \({ }^{\wedge}\) RASQFTEST1 square feet. This is quite a large home. Please confirm if this is correct." HARD SIGNAL [IF RASQFTEST1 = RABLDSQFT1] "I have recorded that unit \({ }^{\wedge}\) RAUNIT1 is \({ }^{\wedge}\) RASQFTEST1 square feet and that the building in which it is located is also \({ }^{\wedge}\) RABLDSQFT1. This is impossible since this building has more than one unit. Please correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
50) [If RASQFTEST1 = DK or RF] RASQFTCATEST1

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT1?
Please consider only unit \({ }^{\wedge}\) RAUNIT1. Is it...
1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?
51) [If RAUNIT2 <> EMPTY] RASQFTEST2

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT2? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999 :
SIGNAL [IF RASQFTEST2 \(<=100\) ] 'I have recorded that unit \({ }^{\wedge}\) RAUNIT2 is
\({ }^{\wedge}\) RASQFTEST2 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit \({ }^{\wedge}\) RAUNIT2."
SIGNAL [IF RASQFTEST2 > 5000] "I have recorded that unit \({ }^{\wedge}\) RAUNIT2 is
\({ }^{\wedge}\) RASQFTEST2 square feet. This is quite a large home. Please confirm if this is correct." HARD SIGNAL [IF RASQFTEST2 = RABLDSQFT2] "I have recorded that unit \({ }^{\wedge}\) RAUNIT2 is \({ }^{\wedge}\) RASQFTEST2 square feet and that the building in which it is located is also
\({ }^{\wedge}\) RABLDSQFT2. This is impossible since this building has more than one unit. Please
correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
52) [If RASQFTEST2 = DK or RF] RASQFTCATEST2

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT2? Please consider only unit \({ }^{\wedge}\) RAUNIT2. Is it...

1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?
53) [If RAUNIT3 <> EMPTY] RASQFTEST3

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT3? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999:
SIGNAL [IF RASQFTEST3 \(<=100\) ] "I have recorded that unit \({ }^{\wedge}\) RAUNIT3 is
\({ }^{\wedge}\) RASQFTEST3 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit \({ }^{\wedge}\) RAUNIT3."
SIGNAL [IF RASQFTEST3 > 5000] "I have recorded that unit \({ }^{\wedge}\) RAUNIT3 is
^RASQFTEST3 square feet. This is quite a large home. Please confirm if this is correct." HARD SIGNAL [IF RASQFTEST3 = RABLDSQFT3] "I have recorded that unit \({ }^{\wedge}\) RAUNIT3 is \({ }^{\wedge}\) RASQFTEST3 square feet and that the building in which it is located is also \({ }^{\wedge}\) RABLDSQFT3. This is impossible since this building has more than one unit. Please correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
54) [If RASQFTEST3 = DK or RF] RASQFTCATEST3

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT3?
Please consider only unit \({ }^{\wedge}\) RAUNIT3. Is it...
1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?
55) [If RAUNIT4 <> EMPTY] RASQFTEST4

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT4? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999 : \(\qquad\)
SIGNAL [IF RASQFTEST4 \(<=100\) ] ' \(I\) have recorded that unit \({ }^{\wedge}\) RAUNIT4 is
\({ }^{\wedge}\) RASQFTEST4 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit \({ }^{\wedge}\) RAUNIT4." SIGNAL [IF RASQFTEST4 > 5000] "I have recorded that unit \({ }^{\wedge}\) RAUNIT4 is
\({ }^{\wedge}\) RASQFTEST4 square feet. This is quite a large home. Please confirm if this is correct."

HARD SIGNAL [IF RASQFTEST4 = RABLDSQFT4] "I have recorded that unit \({ }^{\wedge}\) RAUNIT4 is \({ }^{\wedge}\) RASQFTEST4 square feet and that the building in which it is located is also \({ }^{\wedge}\) RABLDSQFT4. This is impossible since this building has more than one unit. Please correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
56) [If RASQFTEST4 = DK or RF] RASQFTCATEST4

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT4?
Please consider only unit \({ }^{\wedge}\) RAUNIT4. Is it...
1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?
57) [If RAUNIT5 <> EMPTY] RASQFTEST5

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT5? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999:
SIGNAL [IF RASQFTEST5 \(<=100\) ] "I have recorded that unit \({ }^{\wedge}\) RAUNIT5 is
\({ }^{\wedge}\) RASQFTEST5 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit ^ RAUNIT5."
SIGNAL [IF RASQFTEST5 > 5000] "I have recorded that unit \({ }^{\wedge}\) RAUNIT5 is
\({ }^{\wedge}\) RASQFTEST5 square feet. This is quite a large home. Please confirm if this is correct." HARD SIGNAL [IF RASQFTEST5 = RABLDSQFT5] "I have recorded that unit \({ }^{\wedge}\) RAUNIT5 is \({ }^{\wedge}\) RASQFTEST5 square feet and that the building in which it is located is also \({ }^{\wedge}\) RABLDSQFT5. This is impossible since this building has more than one unit. Please correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
58) [If RASQFTEST5 = DK or RF] RASQFTCATEST5

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT5? Please consider only unit \({ }^{\wedge}\) RAUNIT5. Is it...

1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?
59) [If RAUNIT6 <> EMPTY] RASQFTEST6

What is the total floorspace in unit \({ }^{\wedge}\) RAUNIT6? Your best estimate is fine.
Answer must be in the range from 1 up to 99,999:
SIGNAL [IF RASQFTEST6 \(<=100\) ] "I have recorded that unit \({ }^{\wedge}\) RAUNIT6 is
\({ }^{\wedge}\) RASQFTEST6 square feet. This is quite a small home. Please confirm that you are including all living spaces within unit ^ RAUNIT6."
SIGNAL [IF RASQFTEST6 > 5000] "I have recorded that unit ^RAUNIT6 is
\({ }^{\wedge}\) RASQFTEST6 square feet. This is quite a large home. Please confirm if this is correct." HARD SIGNAL [IF RASQFTEST6 = RABLDSQFT6] "I have recorded that unit \({ }^{\wedge}\) RAUNIT6 is \({ }^{\wedge}\) RASQFTEST6 square feet and that the building in which it is located is also \({ }^{\wedge}\) RABLDSQFT6. This is impossible since this building has more than one unit. Please correct either the building or unit square footage."
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE BUILDING SQUARE FOOTAGE OR THE UNIT SQUARE FOOTAGE.
60) [If RASQFTEST6 = DK or RF] RASQFTCATEST6

INTERVIEWER: USE SHOW CARD 3
Which of the following categories best describes the total floorspace in unit \({ }^{\wedge}\) RAUNIT6?
Please consider only unit \({ }^{\wedge}\) RAUNIT6. Is it...
1 Fewer than 600 square feet
2600 to 999 square feet
31,000 to 1,599 square feet
41,600 to 1,999 square feet
52,000 to 2,399 square feet
62,400 to 2,999 square feet
73,000 or more square feet?

\section*{RACOMMENT1}

INTERVIEWER: RECORD ANY INFORMATION HERE ABOUT THE GENERAL CHARACTERISTICS OF THE UNIT OR BUILDING THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. IF THERE ARE NONE, LEAVE BLANK. PRESS "ENTER" TO CONTINUE.
: Now, I have some questions about the heating, specifically in unit(s) \({ }^{\wedge}\) RAUNIT1, (and) \({ }^{\wedge}\) RAUNIT2, (and)
\({ }^{\wedge}\) RAUNIT3, (and) \({ }^{\wedge}\) RAUNIT4, (and) \({ }^{\wedge}\) RAUNIT5, (and) \(\wedge\) RAUNIT6.
INTERVIEWER: PRESS "ENTER" TO CONTINUE.
61) RAFUELHEAT1

INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in unit \({ }^{\wedge}\) RAUNIT1?

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
09 District steam or hot water
[If RAFUELHEAT1 \(=\mathbf{0 0}\) ] RAFUELHEAT1 \(=-2\)
[If RAFUELHEAT1 \(\boldsymbol{\neq - 2 ]}\) RAHEATHOME \(1=1\), [Else] RAHEATHOME1 \(=0\)
62) [If RAFUELHEAT1 = 21] RAFUELHEATSPEC1

What was this other fuel?
63) [If RAFUELHEAT1 \(=-2\) ] RAEQUIPM1

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump
02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor
06 Built-in floor/wall pipeless furnace
07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke
10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT1 \(=\mathbf{- 2}\) ] RAEQUIPM1 \(=9\)
64) [If RAEQUIPM1 = 21] RAEQUIPMSPEC1

\section*{What was this other equipment?}
65) [If RAFUELHEAT1 \(\neq-2\) and (RAUNIT2 \(<>\) EMPTY, RAUNIT3 \(<>\) EMPTY, RAUNIT4 \(<>\) EMPTY, RAUNIT5 \(<>\) EMPTY, RAUNIT6 \(<>\) EMPTY)] RASAMEHEATA

INTERVIEWER: USE SHOW CARD 5
Do units \({ }^{\wedge}\) RAUNIT2, (and) ^RAUNIT3, (and) \(\wedge\) RAUNIT4, (and) \({ }^{\wedge}\) RAUNIT5, (and) \({ }^{\wedge}\) RAUNIT6 also use a(n) [If RAFUELHEAT1 \(=21]^{\wedge}\) RAFUELHEAT1 [If RAFUELHEAT1 \(=\) 21]^RAFUELHEATSPEC1 [If RAEQUIPM1 \(=21\) ]^RAEQUIPM1 [If RAEQUIPM1 = 21]^RAEQUIPMSPEC1?

1 Yes
0 No
66) [If RAFUELHEAT1 \(=-2\) and (RAUNIT2 \(>\) EMPTY, RAUNIT3 \(>\) EMPTY, RAUNIT4 \(>\)
```

[If RASAMEHEATA = 1 or RASAMEHEATB = 0] RAFUELHEAT2 = RAFUELHEAT1 ,
RAFUELHEATSPEC2 = RAFUELHEATSPEC1, RAEQUIPM2 = RAEQUIPM1, RAEQUIPMSPEC2 =
RAEQUIPMSPEC1, [If UNIT3 <> EMPTY] RAFUELHEAT3 = RAFUELHEAT1, RAFUELHEATSPEC3 =
RAFUELHEATSPEC1, RAEQUIPM3 = RAEQUIPM1, RAEQUIPMSPEC3 = RAEQUIPMSPEC1, [If UNIT4
<> EMPTY] RAFUELHEAT4 = RAFUELHEAT1, RAFUELHEATSPEC4 = RAFUELHEATSPEC1,
RAEQUIPM4 = RAEQUIPM1, RAEQUIPMSPEC4 = RAEQUIPMSPEC1 , [If UNIT5 <> EMPTY]
RAFUELHEAT5 = RAFUELHEAT1, RAFUELHEATSPEC5 = RAFUELHEATSPEC1 , RAEQUIPM5 =
RAEQUIPM1 , RAEQUIPMSPEC5 = RAEQUIPMSPEC1, [If UNIT6 <> EMPTY] RAFUELHEAT6 =
RAFUELHEAT1, RAFUELHEATSPEC6 = RAFUELHEATSPEC1 , RAEQUIPM6 = RAEQUIPM1 ,
RAEQUIPMSPEC6 = RAEQUIPMSPEC1
67) [If RAUNIT2 <> EMPTY and (RASAMEHEATA = 0 or RASAMEHEATB = 1)]
RAFUELHEAT2
INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in
unit ^RAUNIT2?
05 Electricity
0 1 ~ N a t u r a l ~ g a s ~ f r o m ~ u n d e r g r o u n d ~ p i p e s
02 Propane (bottled gas)
03 Fuel oil
0 4 ~ K e r o s e n e
07 Wood
0 8 Solar
0 9 District steam or hot water
2 1 Some other fuel
0 0 No space heating fuel used

```
[If RAFUELHEAT2 \(=\mathbf{0 0}\) ] RAFUELHEAT2 \(=-2\)
[If RAFUELHEAT2 \(\boldsymbol{\neq \mathbf { - 2 } ]}\) RAHEATHOME2 \(=1\), [Else] RAHEATHOME2 \(=0\)
68) [If RAFUELHEAT2 = 21] RAFUELHEATSPEC2

What was this other fuel?

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump
02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor
06 Built-in floor/wall pipeless furnace
07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke
10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT2 \(=\)-2] RAEQUIPM2 \(=9\)
70) [If RAEQUIPM2 = 21] RAEQUIPMSPEC2

What was this other equipment?
71) [If RAUNIT3 \(<>\) EMPTY and (RASAMEHEATA \(=0\) or RASAMEHEATB \(=1\) )] RAFUELHEAT3

INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in unit \({ }^{\wedge}\) RAUNIT3?

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
09 District steam or hot water
21 Some other fuel
00 No space heating fuel used
[If RAFUELHEAT3 \(=\mathbf{0 0}\) ] RAFUELHEAT3 \(=-2\)
[If RAFUELHEAT3 \(\boldsymbol{\neq \mathbf { - 2 } ]}\) RAHEATHOME \(3=1\), [Else] RAHEATHOME3 \(=0\)
72) [If RAFUELHEAT3 = 21] RAFUELHEATSPEC3

What was this other fuel?
73) [If RAFUELHEAT3 \(\neq-2\) ] RAEQUIPM3

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump

02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor
06 Built-in floor/wall pipeless furnace
07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke
10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT3 \(=\mathbf{- 2}\) ] RAEQUIPM3 \(=9\)
74) [If RAEQUIPM3 = 21] RAEQUIPMSPEC3

\section*{What was this other equipment?}
75) [If RAUNIT4 <> EMPTY and (RASAMEHEATA \(=0\) or RASAMEHEATB \(=1\) )]

\section*{RAFUELHEAT4}

INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in unit \({ }^{\wedge}\) RAUNIT4?

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
09 District steam or hot water
21 Some other fuel
00 No space heating fuel used
[If RAFUELHEAT4 \(=\mathbf{0 0}\) ] RAFUELHEAT4 \(=-2\)
[If RAFUELHEAT4 \(\boldsymbol{\neq - 2 ]}\) RAHEATHOME4 \(=1\), [Else] RAHEATHOME4 \(=0\)
76) [If RAFUELHEAT4 \(=21\) ] RAFUELHEATSPEC4

What was this other fuel?
77) [If RAFUELHEAT4 \(=-2\) ] RAEQUIPM4

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump
02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor

06 Built-in floor/wall pipeless furnace
07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke
10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT4 \(=\mathbf{- 2}\) ] RAEQUIPM4 \(=9\)
78) [If RAEQUIPM4 \(=21\) ] RAEQUIPMSPEC4

\section*{What was this other equipment?}
79) [If RAUNIT5 <> EMPTY and (RASAMEHEATA \(=0\) or RASAMEHEATB = 1)]

RAFUELHEAT5
INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in unit \({ }^{\wedge}\) RAUNIT5?

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
09 District steam or hot water
21 Some other fuel
00 No space heating fuel used
[If RAFUELHEAT5 \(=\mathbf{0 0}\) ] RAFUELHEAT5 \(=-2\)
[If RAFUELHEAT5 \(\boldsymbol{\neq - 2 ]}\) RAHEATHOME \(5=1\), [EIse] RAHEATHOME5 \(=0\)
80) [If RAFUELHEAT5 = 21] RAFUELHEATSPEC5

What was this other fuel?
81) [If RAFUELHEAT5 \(\neq-2\) ] RAEQUIPM5

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump
02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor 06 Built-in floor/wall pipeless furnace

07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke
10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT5 = -2] RAEQUIPM5 \(=9\)
82) [If RAEQUIPM5 = 21] RAEQUIPMSPEC5

What was this other equipment?
83) [If RAUNIT6 <> EMPTY and (RASAMEHEATA \(=0\) or RASAMEHEATB = 1)]

RAFUELHEAT6
INTERVIEWER: USE SHOW CARD 4
During the 2009 heating season, what was the main fuel used for home space heating in unit \({ }^{\wedge}\) RAUNIT6?

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
09 District steam or hot water
21 Some other fuel
00 No space heating fuel used
[If RAFUELHEAT6 \(=\mathbf{0 0}\) ] RAFUELHEAT6 \(=-2\)
[If RAFUELHEAT6 \(\neq \mathbf{- 2}]\) RAHEATHOME6 \(=1\), [Else] RAHEATHOME6 \(=0\)
84) [If RAFUELHEAT6 = 21] RAFUELHEATSPEC6

What was this other fuel?
85) [If RAFUELHEAT6 \(\neq-2\) ] RAEQUIPM6

INTERVIEWER: USE SHOW CARD 5
What was the main space heating equipment? Was it...
04 Heat pump
03 Central warm-air furnace with ducts to individual rooms other than a heat pump
02 Steam/Hot water system with radiators/convectors in each room or pipes in the floor or walls
05 Built-in electric units in each room installed in walls, ceiling, baseboard, or floor
06 Built-in floor/wall pipeless furnace
07 Built-in room heater burning gas, oil, or kerosene
08 Heating stove burning wood, coal, or coke

10 Portable electric heaters
11 Portable kerosene heaters
09 Fireplace
12 Cooking stove that is used to heat your home as well as to cook
21 Some other equipment
[If RAFUELHEAT6 = -2] RAEQUIPM6 = 9
86) [If RAEQUIPM6 = 21] RAEQUIPMSPEC6

What was this other equipment?
87) [If RAFUELHEAT1 \(=-2\) ] RAEQUIPAGE1

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT \(1 \neq 21]^{\wedge}\) RAFUELHEAT1 [If RAFUELHEAT1 = 21]^RAFUELHEATSPEC1 [If RAEQUIPM1 \(=21]^{\wedge}\) RAEQUIPM1 [If RAEQUIPM1 = 21]^RAEQUIPMSPEC1 used to heat \({ }^{\wedge}\) RAUNIT1?

01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
88) [If RAFUELHEAT1 \(\neq-2\) and (RAUNIT2 \(<>\) EMPTY, RAUNIT3 \(<>\) EMPTY, RAUNIT4 \(<>\) EMPTY, RAUNIT5 <> EMPTY, RAUNIT6 <> EMPTY)] RASAMEHAGEA

INTERVIEWER: USE SHOW CARD 5
Are the heating equipments in units \({ }^{\wedge}\) RAUNIT2, (and) \({ }^{\wedge}\) RAUNIT3, (and) \({ }^{\wedge}\) RAUNIT4, (and)
\({ }^{\wedge}\) RAUNIT5, (and) \({ }^{\wedge}\) RAUNIT6 also \({ }^{\wedge}\) RAEQUIPAGE1?
1 Yes
0 No
[If RASAMEHAGEA = 1] RAEQUIPAGE2 = RAEQUIPAGE1, [If UNIT3 <> EMPTY] RAEQUIPAGE3 = RAEQUIPAGE1, [If UNIT4 \(>\) EMPTY] RAEQUIPAGE4 \(=\) RAEQUIPAGE1, [If UNIT5 \(>\) EMPTY] RAEQUIPAGE5 = RAEQUIPAGE1, [If UNIT6 < > EMPTY] RAEQUIPAGE6 = RAEQUIPAGE1
89) [If RASAMEHAGEA = 0] RAEQUIPAGE2

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT2 \(\neq 21]^{\wedge}\) RAFUELHEAT2 [If RAFUELHEAT2 \(=\)
21]^RAFUELHEATSPEC2 [If RAEQUIPM2 \(\neq 21]^{\wedge}\) RAEQUIPM2 [If RAEQUIPM2 \(=\)
21]^RAEQUIPMSPEC2 used to heat \({ }^{\wedge}\) RAUNIT2?
01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old

0520 years or older
06 As old as the home (IF VOLUNTEERED)
90) [If RASAMEHAGEA \(=0\) and RAUNIT3 \(>\) EMPTY] RAEQUIPAGE3

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT3 \(\neq 21]^{\wedge}\) RAFUELHEAT3 [If RAFUELHEAT3 \(=\) 21]^RAFUELHEATSPEC3 [If RAEQUIPM3 \(=21]^{\wedge}\) RAEQUIPM3 \([\) If RAEQUIPM3 \(=\) \(21]^{\wedge}\) RAEQUIPMSPEC3 used to heat \({ }^{\wedge}\) RAUNIT3?

01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
91) [If RASAMEHAGEA \(=0\) and RAUNIT4 \(<>\) EMPTY] RAEQUIPAGE4

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT4 \(\neq 21]^{\wedge}\) RAFUELHEAT4 [If RAFUELHEAT4 \(=\) 21]^RAFUELHEATSPEC4 [If RAEQUIPM4 \(=21]^{\wedge}\) RAEQUIPM4 [If RAEQUIPM4 \(=\) \(21]^{\wedge}\) RAEQUIPMSPEC4 used to heat \({ }^{\wedge}\) RAUNIT4?

01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
92) [If RASAMEHAGEA \(=0\) and RAUNIT5 \(>\) EMPTY] RAEQUIPAGE5

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT5 \(\neq 21]^{\wedge}\) RAFUELHEAT5 5 [If RAFUELHEAT5 \(=\) 21]^RAFUELHEATSPEC5 [If RAEQUIPM5 \(=21]^{\wedge}\) RAEQUIPM5 [If RAEQUIPM5 = \(21]^{\wedge}\) RAEQUIPMSPEC5 used to heat \({ }^{\wedge}\) RAUNIT5?

01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
93) [If RASAMEHAGEA \(=0\) and RAUNIT6 \(\gg\) EMPTY] RAEQUIPAGE6

INTERVIEWER: USE SHOW CARD 6
Approximately how old is the [If RAFUELHEAT6 \(\neq 21]^{\wedge}\) RAFUELHEAT6 [If RAFUELHEAT6 \(=\) 21]^RAFUELHEATSPEC6 [If RAEQUIPM6 \(=21]^{\wedge}\) RAEQUIPM6 [If RAEQUIPM6 = \(21]^{\wedge}\) RAEQUIPMSPEC6 used to heat \({ }^{\wedge}\) RAUNIT6?

01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
RECS (1905-0092)

0520 years or older
06 As old as the home (IF VOLUNTEERED)
94) [If RAFUELHEAT1 \(\neq-2\) 2] RAHEATOTH1

Does the [If RAFUELHEAT \(1 \neq 21]^{\wedge}\) RAFUELHEAT1 [If RAFUELHEAT1 \(=\) 21]^RAFUELHEATSPEC1 [If RAEQUIPM \(1 \neq 21]^{\wedge}\) RAEQUIPM1 [If RAEQUIPM1 = \(21]^{\wedge}\) RAEQUIPMSPEC1 used to heat \({ }^{\wedge}\) RAUNIT1 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
95) [If RAFUELHEAT \(2 \neq-2\) ] RAHEATOTH2 Does the [If RAFUELHEAT2 \(\neq 21]^{\wedge}\) RAFUELHEAT2 2 [If RAFUELHEAT2 \(=\) 21]^RAFUELHEATSPEC2 [If RAEQUIPM \(2 \neq 21]^{\wedge}\) RAEQUIPM2 [If RAEQUIPM \(2=\) \(21]^{\wedge}\) RAEQUIPMSPEC2 used to heat \({ }^{\wedge}\) RAUNIT2 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
96) [If RAFUELHEAT3 \(\neq-2\) ] RAHEATOTH3

Does the [If RAFUELHEAT3 \(\neq 21]^{\wedge}\) RAFUELHEAT3 [If RAFUELHEAT3 \(=\) 21]^RAFUELHEATSPEC3 [If RAEQUIPM3 \(=21]^{\wedge}\) RAEQUIPM3 [If RAEQUIPM3 \(=\) \(21]^{\wedge}\) RAEQUIPMSPEC3 used to heat \({ }^{\wedge}\) RAUNIT3 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
97) [If RAFUELHEAT4 \(\neq-2\) ] RAHEATOTH4

Does the [If RAFUELHEAT4 \(\neq 21]^{\wedge}\) RAFUELHEAT4 4 [If RAFUELHEAT4 \(=\)
21]^RAFUELHEATSPEC4 [If RAEQUIPM4 \(=21]^{\wedge}\) RAEQUIPM4 [If RAEQUIPM4 \(=\) \(21]^{\wedge}\) RAEQUIPMSPEC4 used to heat \({ }^{\wedge}\) RAUNIT4 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
98) [If RAFUELHEAT5 \(\neq-2\) ] RAHEATOTH5

Does the [If RAFUELHEAT5 \(=21]^{\wedge}\) RAFUELHEAT5 [If RAFUELHEAT5 \(=\) 21]^RAFUELHEATSPEC5 [If RAEQUIPM5 \(=21]^{\wedge}\) RAEQUIPM5 [If RAEQUIPM5 = \(21]^{\wedge}\) RAEQUIPMSPEC5 used to heat \({ }^{\wedge}\) RAUNIT5 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
99) [If RAFUELHEAT6 \(\neq-2\) ] RAHEATOTH6 Does the [If RAFUELHEAT6 \(\neq 21]^{\wedge}\) RAFUELHEAT6 [If RAFUELHEAT6 \(=\) 21]^RAFUELHEATSPEC6 [If RAEQUIPM5 \(=21]^{\wedge}\) RAEQUIPM6 [If RAEQUIPM6 = \(21]^{\wedge}\) RAEQUIPMSPEC6 used to heat \({ }^{\wedge}\) RAUNIT6 also heat any other apartments, condos, households, businesses, or buildings?

1 Yes
0 No
100) [If RAFUELHEAT1 \(\neq-2\) and RASQFTCATEST \(1 \neq\) DK or RF] RAHSQFT1

Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT1 is [If RASQFTEST1 \(\neq\) DK or RF]^RASQFTEST1 square feet [If RASQFTEST1 = DK or RF]^RASQFTCATEST1. Was all of this space heated in 2009 ? 1 Yes 0 No
[If RAHSQFT1 \(=\mathbf{1}\) AND RASQFTEST1 \(\boldsymbol{= 1}\) DK or RF] RAHSQFT1 \(=\) RASQFTEST1
101) [If RAHSQFT1 \(=0\) and RASQFTEST \(1 \neq \mathrm{DK}\) or RF] RAHTSQFT1 How many square feet in unit \({ }^{\wedge}\) RAUNIT1 was actually heated? Answer must be in the range from 1 up to 99,999 :

HARD SIGNAL [IF RAHTSQFT1 > RASQFTEST1] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT1 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST1. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED SQUARE FOOTAGE IN THE UNIT.
102) [If RAFUELHEAT2 \(\neq-2\) and RASQFTCATEST \(2 \neq\) DK or RF] RAHSQFT2

Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT2 is [If RASQFTEST2 \(\neq\) DK or RF] \({ }^{\wedge}\) RASQFTEST2 square feet [If RASQFTEST2 = DK or RF]^RASQFTCATEST2. Was all of this space heated in 2009?

1 Yes
0 No
[If RAHSQFT2 \(=\mathbf{1}\) AND RASQFTEST2 \(=\mathbf{D K}\) or RF] RAHSQFT2 \(=\) RASQFTEST2
103) [If RAHSQFT2 \(=0\) and RASQFTEST2 \(\neq\) DK or RF] RAHTSQFT2 How many square feet in unit \({ }^{\wedge}\) RAUNIT2 was actually heated?
Answer must be in the range from 1 up to 99,999 :
HARD SIGNAL [IF RAHTSQFT2 > RASQFTEST2] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT2 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST2. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED SQUARE FOOTAGE IN THE UNIT.
104) [If RAFUELHEAT3 \(\neq-2\) and RASQFTCATEST3 \(\neq\) DK or RF] RAHSQFT3 Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT3 is [If RASQFTEST3 \(\neq\) DK or RF]^RASQFTEST3 square feet [If RASQFTEST3 = DK or RF]^RASQFTCATEST3. Was all of this space heated in 2009?

1 Yes
0 No
[If RAHSQFT3 \(=\mathbf{1}\) AND RASQFTEST3 \(=\) DK or RF] RAHSQFT3 \(=\) RASQFTEST3
105) [If RAHSQFT3 \(=0\) and RASQFTEST3 \(\neq\) DK or RF] RAHTSQFT3

How many square feet in unit \({ }^{\wedge}\) RAUNIT3 was actually heated?
Answer must be in the range from 1 up to 99,999 :
HARD SIGNAL [IF RAHTSQFT3 > RASQFTEST3] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT3 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST3. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED SQUARE FOOTAGE IN THE UNIT.
106) [If RAFUELHEAT4 \(\neq-2\) and RASQFTCATEST4 \(\neq\) DK or RF] RAHSQFT4 Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT4 4 is [If RASQFTEST4 \(\neq\) DK or RF] \({ }^{\wedge}\) RASQFTEST4 square feet [If RASQFTEST4 \(=\mathrm{DK}\) or RF]^RASQFTCATEST4. Was all of this space heated in 2009 ?

1 Yes
0 No
[If RAHSQFT4 = \(\mathbf{1}\) AND RASQFTEST4 \(=\mathbf{D K}\) or RF] RAHSQFT4 \(=\) RASQFTEST4
107) [If RAHSQFT4 \(=0\) and RASQFTEST4 \(\neq\) DK or RF] RAHTSQFT4

How many square feet in unit \({ }^{\wedge}\) RAUNIT4 was actually heated?
Answer must be in the range from 1 up to 99,999 :
HARD SIGNAL [IF RAHTSQFT4 > RASQFTEST4] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT4 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST4. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED SQUARE FOOTAGE IN THE UNIT.
108) [If RAFUELHEAT5 \(\neq-2\) and RASQFTCATEST5 \(\neq\) DK or RF] RAHSQFT5 Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT5 5 is [If RASQFTEST5 \(\neq\) DK or RF]^RASQFTEST5 square feet [If RASQFTEST5 = DK or RF]^RASQFTCATEST5. Was all of this space heated in 2009 ? 1 Yes
0 No
[If RAHSQFT5 \(=\mathbf{1}\) AND RASQFTEST5 \(=\mathbf{D K}\) or RF] RAHSQFT5 \(=\) RASQFTEST5
109) [If RAHSQFT5 \(=0\) and RASQFTEST5 \(\neq\) DK or RF] RAHTSQFT5

How many square feet in unit \({ }^{\wedge}\) RAUNIT5 was actually heated?
Answer must be in the range from 1 up to 99,999 :
HARD SIGNAL [IF RAHTSQFT5 > RASQFTEST5] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT5 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST5. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED
110) [If RAFUELHEAT6 \(\neq-2\) and RASQFTCATEST6 \(\neq\) DK or RF] RAHSQFT6

Earlier, you told me that unit \({ }^{\wedge}\) RAUNIT6 is [If RASQFTEST6 \(\neq\) DK or RF]^RASQFTEST6 square feet [If RASQFTEST6 = DK or RF]^RASQFTCATEST6. Was all of this space heated in 2009? 1 Yes
0 No
[If RAHSQFT6 = \(\mathbf{1}\) AND RASQFTEST6 \(=\) DK or RF] RAHSQFT6 = RASQFTEST6
111) [If RAHSQFT6 \(=0\) and RASQFTEST6 \(\neq\) DK or RF] RAHTSQFT6

How many square feet in unit \({ }^{\wedge}\) RAUNIT6 was actually heated?
Answer must be in the range from 1 up to 99,999 :
HARD SIGNAL [IF RAHTSQFT6 > RASQFTEST6] "I have recorded that the heated square footage is \({ }^{\wedge}\) RAHTSQFT6 but that the total square footage in the unit is only \({ }^{\wedge}\) RASQFTEST6. Which answer do I need to revise, total square footage or heated square footage?"
INTERVIEWER: PRESS OK AND USE THE BACK ARROWS TO GO BACK AND CORRECT EITHER THE TOTAL SQUARE FOOTAGE IN THE UNIT OR THE HEATED SQUARE FOOTAGE IN THE UNIT.

\section*{RACOMMENT2}

INTERVIEWER: RECORD ANY INFORMATION HERE ABOUT THE HEATING SYSTEM IN THE UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. IF THERE are none, LEAVE BLANK. PRESS "ENTER" TO CONTINUE.
: Next, I have some questions about how water is heated in unit [PRELOAD UNIT NUMBER]. INTERVIEWER: PRESS "ENTER" TO CONTINUE.
19) RAFUELH2O

INTERVIEWER: USE SHOW CARD 7
What is the main fuel used to heat water for washing and bathing in unit \({ }^{\wedge}\) UNIT?
Was it...
05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
03 Fuel oil
04 Kerosene
07 Wood
08 Solar
21 Some other fuel
00 No water heating fuel used
[If RAFUELH2O = 00] RAFUELH2O = -2
20) [If RAFUELH2O = 21] RAFUELH2OSPEC

What is this other fuel?
21) [If RAFUELH2O \(\neq-2\) ] RAWHEATAGE

INTERVIEWER: USE SHOW CARD 8
Approximately how old is the main water heater?
01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)

\section*{RACOMMENT3}

INTERVIEWER: RECORD ANY INFORMATION HERE ABOUT THE WATER HEATING SYSTEM IN THE UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. IF THERE ARE NONE, LEAVE BLANK. PRESS "ENTER" TO CONTINUE.
: Now, I have some questions about the cooling in unit [PRELOAD UNIT NUMBER].
INTERVIEWER: PRESS "ENTER" TO CONTINUE.
22) RAAIRCOND

In 2009, did unit \({ }^{\wedge}\) UNIT use any air-conditioning?
1 Yes
0 No
23) RACOOLTYPE

INTERVIEWER: USE SHOW CARD 9
What type of air-conditioning equipment did unit \({ }^{\wedge}\) UNIT use? Was it...
1 A central system,
2 Individual units in the windows or wall, or
3 Both central and individual units, or
24) [If RACOOLTYPE \(=1\) or 3] RAAGECENAC

INTERVIEWER: USE SHOW CARD 10
Approximately how old is the central air-conditioning equipment unit \({ }^{\wedge}\) UNIT uses?
01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old

4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
25) [If RACOOLTYPE \(=2\) or 3] RAWWACAGE

INTERVIEWER: USE SHOW CARD 11
Approximately how old is the most-used window/wall unit?
01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
26) [If RAAIRCOND \(\neq 0\) ] RAACOTHERS

Does this equipment also cool any other apartments, condos, households, businesses, or buildings besides unit \({ }^{\wedge}\) UNIT?

1 Yes
0 No

\section*{RACOMMENT4}

INTERVIEWER: RECORD ANY INFORMATION HERE ABOUT THE HEATING SYSTEM IN THE UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. IF THERE ARE NONE, LEAVE BLANK. PRESS "ENTER" TO CONTINUE.
> : Now, I have a few questions about the large appliances in unit [PRELOAD UNIT NUMBER]. Let's begin with some common kitchen appliances.

> INTERVIEWER: PRESS "ENTER" TO CONTINUE.
27) RACOOKAPP

INTERVIEWER: USE SHOW CARD 12
What type of cooking appliance does unit \({ }^{\wedge}\) UNIT have? Check all that apply.
1 A stove that has both burners and one or two ovens
2 A separate built-in range top or burners only
3 A separate built-in oven only
[If RACOOKAPP \(=1\) ] RASTOVEN \(=1\)
[If RACOOKAPP \(=2\) ] RASTOVE \(=1\)
[If RACOOKAPP \(=3\) ] RAOVEN \(=1\)
28) [If RACOOKAPP = 1] RASTOVENFUEL

INTERVIEWER: USE SHOW CARD 13
What fuel does the stove use? Is it...

05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
21 Some other fuel
29) [If RASTOVENFUEL = 21] RASTOVENFUELSPEC

What is this other fuel?
30) [If RACOOKAPP = 2] RASTOVEFUEL

INTERVIEWER: USE SHOW CARD 14
What fuel does the separate built-in range top or burners use? Is it...
05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
21 Some other fuel
31) [If RASTOVEFUEL = 21] RASTOVEFUELSPEC

What is this other fuel?
32) [If RACOOKAPP = 3] RAOVENFUEL

INTERVIEWER: USE SHOW CARD 15
What fuel does the separate oven use? Is it...
05 Electricity
01 Natural gas from underground pipes
02 Propane (bottled gas)
21 Some other fuel
33) [If RAOVENFUEL = 21] RAOVENFUELSPEC What is this other fuel?
[If RACOOKAPP \(=1\) or 1,2 or \(1,2,3\) THEN RAFUELFOOD \(=\) RASTOVENFUEL] Or [If RACOOKAPP \(=2\) THEN RAFUELFOOD \(=\) RASTOVEFUEL] Or [If RACOOKAPP \(=3\), or 2,3 THEN RAFUELFOOD \(=\) RAOVENFUEL]
34) RATYPERFR1

INTERVIEWER: USE SHOW CARD 16
Which of the pictures best describes unit \({ }^{\wedge}\) UNIT's refrigerator? If unit \({ }^{\wedge}\) UNIT has more than one refrigerator, please consider the main refrigerator. Was it a...

1 Full-size with one door,
2 Full-size with two doors side-by-side,
3 Full-size with one or two doors on the top and one door on the bottom,
4 Compact or micro-fridge, or
5 Some other kind
35) RAAGERFRI1

INTERVIEWER: USE SHOW CARD 17
Approximately how old is the refrigerator? Your best estimate is fine.
01 Less than 2 years old
022 to 4 years old
035 to 9 years old
4110 to 14 years old
4215 to 19 years old
0520 years or older
06 As old as the home (IF VOLUNTEERED)
36) RACWASHER

Is there a clothes washing machine in unit \({ }^{\wedge}\) UNIT? Do not include community washers that are located in the basement or laundry rooms in an apartment building.

1 Yes
0 No
37) [If RACWASHER = 1] RADRYER

Is there a clothes dryer in unit \({ }^{\wedge}\) UNIT? Do not include community dryers that are located in the basement or laundry rooms in an apartment building.

1 Yes
0 No

\section*{RACOMMENT5}

INTERVIEWER: RECORD ANY INFORMATION HERE ABOUT THE LARGE APPLIANCES IN THE UNIT THAT MIGHT PROVIDE CLARIFICATION TO THE RESPONDENT'S ANSWERS. IF THERE ARE NONE, LEAVE BLANK. PRESS "ENTER" TO CONTINUE.
: We are now at the last section of our interview on unit [PRELOAD UNIT NUMBER] at [PRELOAD THE ADDRESS OF THE BUILDING]. I just have a few more questions left.

INTERVIEWER: PRESS "ENTER" TO CONTINUE.
38)
[If RAFUELHEAT \(\neq-2\) ] RAFUELHEATPAY
In 2009, was the \({ }^{\wedge}\) RAFUELHEAT used for heating in unit \({ }^{\wedge}\) UNIT paid for by the tenant, included in the rent or condominium fee, or paid some other way?

1 Tenant
2 Included in the rent
3 Some other way
39) [If RAFUELHEATPAY = 3] RAFUELHEATPAYSPEC

What was this other way?
40) [If RAFUELH2O \(\neq-2\) ] RAFUELH2OPAY

In 2009, was the \({ }^{\wedge}\) RAFUELH2O used for water heating in unit \({ }^{\wedge}\) UNIT paid for by the tenant, included in the rent or condominium fee, or paid some other way?

1 Tenant
2 Included in the rent
3 Some other way
41) [If RAFUELH2OPAY = 3] RAFUELH2OPAYSPEC

What was this other way?
42) [If RAAIRCOND \(\neq 0\) ] RACOOLTYPEPAY

In 2009, was the electricity used for air-conditioning in unit \({ }^{\wedge}\) UNIT paid for by the tenant, included in the rent or condominium fee, or paid some other way?

1 Tenant
2 Included in the rent
3 Some other way
43) [If RACOOLTYPEPAY = 3] RACOOLTYPEPAYSPEC

What was this other way?
44) RAFUELFOODPAY

In 2009, was the \({ }^{\wedge}\) RAFUELFOOD used for cooking in unit \({ }^{\wedge}\) UNIT paid for by the tenant, included in the rent or condominium fee, or paid some other way?

1 Tenant
2 Included in the rent
3 Some other way
45) [If RAFUELFOOD = 3] RAFUELFOODPAYSPEC

What was this other way?
46) RALIGHTPAY

In 2009, was the electricity used for lighting in unit \({ }^{\wedge}\) UNIT paid for by the tenant, included in the rent or condominium fee, or paid some other way?

1 Tenant
2 Included in the rent
3 Some other way
47) [If RALIGHTPAY = 3] RALIGHTPAYSPEC

What was this other way?

FUEL1: If RAFUELHEAT \(=05\) and RAFUELHEATPAY \(=2\) or If RAFUELH2O \(=05\) and RAFUELH2OPAY \(=2\) or

If RACOOLTYPEPAY \(=2\) or
If RAFUELFOOD \(=05\) and RAFUELFOODPAY \(=2\) or If RALIGHTPAY \(=2\)
"Electricity"

FUEL2: If RAFUELHEAT \(=01\) and RAFUELHEATPAY \(=2\) or If RAFUELH2O \(=01\) and RAFUELH2OPAY \(=2\) or If RAFUELFOOD \(=01\) and RAFUELFOODPAY \(=2\) or "Natural gas"

> FUEL3: If RAFUELHEAT \(=02\) and RAFUELHEATPAY \(=2\) or If RAFUELH2O \(=02\) and RAFUELH2OPAY \(=2\) or If RAFUELFOOD \(=02\) and RAFUELFOODPAY \(=2\) or "Propane"

FUEL4: If RAFUELHEAT \(=03\) and RAFUELHEATPAY \(=2\) or If RAFUELH2O \(=03\) and RAFUELH2OPAY \(=2\) or "Fuel oil"
[If FUEL1 = 1 or FUEL2 \(=1\) or FUEL3 \(=1\) or FUEL4 \(=1]\)
: In this interview you have told me what types of energy unit \({ }^{\wedge}\) UNIT used and who paid for it. In addition, we would like to find out, how much energy was used in the past year that was paid for by the landlord.

Getting that information directly from your energy suppliers would add to the data you've given me and improve our estimates of how much energy is being consumed in the U.S. I will now close out this portion of the interview and take down your \({ }^{\wedge}\) FUEL1, \({ }^{\wedge}\) FUEL2, \({ }^{\wedge}\) FUEL3, \({ }^{\wedge}\) FUEL4 supplier information.

Thank you very much for your time and cooperation.
INTERVIEWER: PRESS "ENTER" TO EXIT THE QUESTIONNAIRE.
ENTER THE SUPPLIER INFORMATION ON THE FORMS AFTER CLOSING OUT THE INTERVIEW.
[If FUEL1 \(=0\), FUEL2 \(=0\), FUEL3 \(=0\), FUEL4 \(=0]\)
That completes the interview on unit \({ }^{\wedge}\) UNIT.
Thank you very much for your time and cooperation.
INTERVIEWER: PRESS "ENTER" TO EXIT THE QUESTIONNAIRE.

EXITBLAISE
INTERVIEWER: TO SUCCESSFULLY COMPLETE AND SAVE THIS INTERVIEW AND
EXIT CAPI YOU MUST FIRST ENTER YOUR 6-DIGIT FIELD INTERVIEWER
IDENTIFICATION NUMBER AND THEN PRESS THE "ENTER" KEY.

\title{
Household Propane (Bottled Gas or LPG) Usage Form
}

\section*{Service}

\section*{Address:}

STEP 1 If the customer account number is not shown on the label, please enter it here.
Customer Account: \(\qquad\)
\(\qquad\) 1 1 1 _ I_ 1 \(\qquad\)
\(\qquad\) 1 1_1 1 1_1

STEP 2 Now, please turn the page and answer the seven questions for the household identified above.

Completed forms are due by MM-DD-YYYY. If you have any questions, please call (toll-free) 1-NNN-NNN-NNNN. Ask for the Supplier Survey Specialist.

This report is mandatory under Public Law 93-275, as amended. See the enclosed Answers to Frequently Asked Questions for more details concerning confidentiality and sanctions.

STEP 3 Use the enclosed self-addressed envelope and return the completed form to:

> U.S. Department of Energy
> c/o The Contractor
> Contractor's Street Address
> Contractor's City, State, and ZIP Code

Or you may FAX the completed form to The Contractor at (NNN) NNN-NNNN.
Title 18 U.S.C. 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction.

\footnotetext{
Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this reporting burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to the Energy Information Administration, Statistics and Method Group, El-70, 1000 Independence Avenue, SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.
}
1. Please provide information on all deliveries to this household from October 1, 2008, to March 31, 2010.
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline Delivery Number & Enter the Delivery Date (Month/Day/Year) & \multicolumn{3}{|l|}{\begin{tabular}{l}
Circle the type of fuel sold \\
To the household \\
Type of Fuel Sold \({ }^{\text {a }}\) \\
P = Propane \\
\(B=\) Butane \\
\(\mathrm{O}=\) Other
\end{tabular}} & Check the
Unit of Measure for the Fuel
Delivered to the Household
\begin{tabular}{l} 
Pounds \(\quad \square\) Cubic Meters \\
\(\square\) Gallons \(\quad \square\) Decitherms \\
\(\square\) Cubic Feet \(\square\) Other \\
and Enter the \\
Quantity of Fuel Delivered
\end{tabular} ( & Enter the Price per Unit (U.S. \$0.00) & Enter the Total Dollar Amount (including taxes and other charges) for this Delivery \({ }^{\text {c }}\) (US\$ 000.) \\
\hline 1 & & P & B & O & & & \\
\hline 2 & & P & B & O & & & \\
\hline 3 & & P & B & O & & & \\
\hline 4 & & P & B & O & & & \\
\hline 5 & & P & B & O & & & \\
\hline 6 & & P & B & O & & & \\
\hline 7 & & P & B & O & & & \\
\hline 8 & & P & B & O & & & \\
\hline 9 & & P & B & O & & & \\
\hline 10 & & P & B & O & & & \\
\hline 11 & & P & B & O & & & \\
\hline 12 & & P & B & O & & & \\
\hline 13 & & P & B & O & & & \\
\hline 14 & & P & B & O & & & \\
\hline 15 & & P & B & O & & & \\
\hline 16 & & P & B & O & & & \\
\hline 17 & & P & B & O & & & \\
\hline 18 & & P & B & O & & & \\
\hline
\end{tabular}
a. Propane includes all products designated in American Society for Testing and Materials Specification D1835 and Gas Processors Association Specifications for commercial propane and HD-5 propane. Butane is designated in American Society for Testing and Materials Specification D1835 and Gas Processors Association Specifications for commercial butane. Other includes any liquefied petroleum gas (LPG) other than propane or butane. If the gas delivered is a mixture of propane and butane, circle "Other" and give the proportions of each in Question 2.
b. Pound is a unit of weight equal to 16 ounces ( 7,000 grains); Gallon is a unit of liquid measure equal to 4 quarts ( 231 cubic inches); Cubic feet (cf) is a unit of volume equal to 1 cubic foot at a pressure base of 14.73 pounds standard per square inch absolute and a temperature base of 60 degrees Fahrenheit; Cubic meter is a unit of measure which equals 35.314 cubic feet; Decitherm is a unit of heat equal to 10,000 BTUs; Other includes delivery of cylinders.
c. Include in the Total Dollar Amount for this Billing Period all state and local taxes, fuel adjustment charges and system charges (minimum bill or base charge). Exclude merchandise, repairs, and service charges. If the household is on the budget plan, do not provide the budgeted bill; instead, provide the dollar amount that is the cost of the actual consumption in the period.
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline Fuel 9 & \multicolumn{2}{|c|}{Beginning Date
11-16} & \multicolumn{3}{|c|}{Ending Date 17-22} & \[
\begin{aligned}
& \text { CR } \\
& 23
\end{aligned}
\] & 24 & 25 & \[
\begin{aligned}
& \text { Reason } \\
& 26
\end{aligned}
\] & & 28 & \[
\begin{gathered}
\text { R/E } \\
30
\end{gathered}
\] \\
\hline 3 & & & & & & & & & & & & \\
\hline Units 37 & \[
\begin{aligned}
& \text { TPRs } \\
& 38-39
\end{aligned}
\] & First Company
\[
40-45
\] & \[
\begin{gathered}
\text { Prs } \\
46-47
\end{gathered}
\] & \[
\begin{aligned}
& \text { FT } \\
& 48
\end{aligned}
\] & \[
\begin{gathered}
D C \\
49
\end{gathered}
\] & Second Com 50-55 & & \[
\begin{gathered}
\text { Prs } \\
56-57
\end{gathered}
\] & FT
58 & & \[
\begin{gathered}
\text { DC } \\
59
\end{gathered}
\] & \[
\begin{gathered}
\text { \#S } \\
71-72
\end{gathered}
\] \\
\hline
\end{tabular}
2. If some other type of fuel was delivered to the household ("Other" was circled for type of fuel in Question 1), what fuel was sold? Write in the type of fuel on the lines below. If a mixture of fuels was sold, write in the types of fuels and the proportion of each.
3. What is the capacity of this household's storage tank(s)? Enter the capacity for the two largest tanks (if there is more than one) in the boxes below. Under each box, check the appropriate measure of capacity for each tank. If the capacity is not known, write "Not Known" in the box.


Tank \#1
 \(\square\) GallonsPounds
Pounds
\(\square\) Other \(\qquad\)
4. Was this household your customer as of January 1, 2009?
\(\square\) Yes \(\rightarrow\) Go to Question 5.No
4a. If no, what was the date this household became a customer of your company? Enter the date in the box below. If you don't know the date or the household was never a customer, check the appropriate answer below the box.
Don't know the dateHousehold was never a customer
5. Is this household currently your customer?

Yes \(\rightarrow\) Go to Question 6.
No

\section*{\(5 a\).}

If no, what was the date when this household stopped being a customer of your company? Enter the date in the box below. If you don't know the date or the household was never a customer, check the appropriate answer below the box.
Don't know the dateHousehold was never a customer
6. What was the source of the information about deliveries to this household?
Mark all sources of information that apply.From the company recordsAn estimate made by a company representativeInformation secured from the customer
7. Please provide the following information for the person who completed this form. Please print.

Name: \(\qquad\)
Company: \(\qquad\)
Telephone: \(\qquad\)
E-mail Address: \(\qquad\)
Fax Number: \(\qquad\)
Date: \(\qquad\)

USE THIS SPACE FOR ANY ADDITIONAL NOTES TO EXPLAIN YOUR ENTRIES ON THIS FORM
\(\qquad\)
\(\qquad\)
\(\qquad\)
\(\qquad\)

Step 3 Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
Or you may FAX the completed form to The Contractor at (NNN) NNN-NNNN.
Form EIA-457D (2009) - Household Propane (Bottled Gas or LPG) Usage Form; OMB No. 1905-0092, Expiring Month DD. 20 YY

\title{
2009 Residential Energy Consumption Survey
}

\section*{Answers to Frequently Asked Questions \\ About the Household Propane (LPG or Bottled Gas) Usage Form \\ What is the purpose of the Residential Energy Consumption Survey?}

The Residential Energy Consumption Survey (RECS) collects data on energy consumption and expenditures in U.S. housing units. Over 15,000 statistically selected households across the U.S. have already provided information about their household, the physical characteristics of their housing unit, their energy-using equipment, and their energy suppliers. Now we are requesting the energy billing records for these households from each of their energy suppliers. After all this information has been collected, the information will be used to publish aggregate statistics on the consumption and expenditures of energy by U.S. households and used to help determine future U.S. energy needs.

\section*{What is the purpose of this form?}

The purpose of this form is to obtain information on the total consumption of, and charges for, propane (also called LPG or bottled gas) for the household identified on the front of the enclosed data collection form.

\section*{How do I know this is a valid U.S. Government survey?}

All U.S. Government surveys are required to be reviewed by the U.S. Office of Management and Budget (OMB). An OMB approved survey will have a valid OMB number and expiration date on the data collection form. You are not required to respond to this form unless it displays a currently valid OMB control number. You will find the OMB approval number and expiration date at the top left-hand corner of this form. In addition, if you wish to contact someone at the U.S. Department of Energy to verify that this is a valid survey, call Chip Berry at (202) 586-5543 or you can e-mail him at james.berry@eia.doe.gov.

\section*{What data are to be reported?}

The total consumption to be reported is all the individual amounts delivered to the household during the period from October 1, 2008, to March 31, 2010. If the household has been a customer at the specified address for less than this period, just report the household's consumption at that address for whatever period you have data in your records. All dollar amounts should be reported in U.S. dollars and cents.

\section*{Who is conducting the survey?}

The sponsor of this survey, the Energy Information Administration of the U.S. Department of Energy, has contracted with a Contractor to collect the information for the Residential Energy Consumption Survey. The Contractor is a well respected survey research firm. You will return your completed forms to the Contractor.

\section*{How long will it take to complete this form?}

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time of reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the collection of information.

\section*{Why must I fill out this form? Why is my response mandatory?}

This report is required by law. The timely submission of Form EIA-457D by those required to report is manda-tory under Section 13(b) of the Federal Energy Administration Act of 1974 (FEAA) (Public Law 93-275), as amended. Failure to respond may result in a civil penalty of not more than \(\$ 2,750\) per day for each violation, or a fine of not more than \(\$ 5,000\) per day for each willful violation. The government may bring a civil action to prohibit reporting violations which may result in a temporary restraining order or a preliminary or permanent injunction without bond. In such civil action, the court may also issue mandatory injunctions commanding any person to comply with these
reporting requirements.

\section*{How may I report these data? What format can I use?}

Data may be submitted directly on the enclosed data collection form. Other formats, such as computer-generated listings, which provide all the information requested and are convenient for your company may also be used. If some other format is used, please clearly indicate where each piece of the requested information on this form is listed.

\section*{When is this form due?}

Unless otherwise specified, this data collection form is due by MM-DD-YYYY. You are encouraged to submit the completed form prior to the due date.

\section*{How are the data protected and kept confidential?}

Any information collected that might permit the identification of respondents or their households will be kept confidential and used only for statistical purposes. Data that can be identified with individual respondents will not be disclosed or released by the Contractor to anyone for any other purpose, except as required by law. If you are concerned about individual account information, you may choose to mark out the account number or name on any computer-generated listing that you send us.

\section*{What is the Survey Identification Number (ID)?}

The survey identification number (ID) for each household is in the upper right-hand corner of the household label on the front of each reporting form. Whenever available, the customer account number is printed beneath the household's address on the label. Please use the survey ID number for the household whenever it is necessary to communicate with the Contractor for clarification or additional information.


\section*{Where do I send the form?}

Please use the enclosed self-addressed envelope to mail the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractors City, State, and ZIP Code
You may also FAX the completed form to the Contractor at: (NNN) NNN-NNNN.

\section*{What if I still have questions?}

If you have any further questions concerning this form, please call (800) NNN-NNNN toll free. Ask for the RECS Supplier Survey Specialist. If you wish to contact someone at the U.S. Department of Energy, call Chip Berry at (202) 586-5543 or e-mail him at james.berry@eia.doe.gov.


\title{
Household Natural Gas Usage Form
}

Service
Address:

STEP1 If the customer account number is not shown above, please enter it here.


STEP 2 Now, please turn the page and provide the requested information for the household identified above.

Completed forms are due by MM-DD-YYYY. If you have any questions, please call (toll-free) 1-NNN-NNN-NNNN. Ask for the Supplier Survey Specialist.

This report is mandatory under Public Law 93-275, as amended. See the enclosed Answers to Frequently Asked Questions for more details concerning confidentiality and sanctions.

STEP 3 Use the enclosed self-addressed envelope and return the completed form to:

> U.S. Department of Energy
> c/o The Contractor
> Contractor's Street Address
> Contractor's City, State, and ZIP Code

Or you may FAX the completed form to The Contractor at NNN-NNN-NNNN

\footnotetext{
Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this reporting burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to the Energy Information Administration, Statistics and Method Group, EI-70, 1000 Independence Avenue, SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.
}
1. Please provide information on natural gas sold and/or delivered to this housing unit from October 1, 2008 to March 31, 2010.
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline Billing Period & Enter the Date Meter Was Read (Month/Day/Year) for each Billing Period &  &  & \begin{tabular}{l}
the \\
Sold \\
th \\
nly \\
nd
\end{tabular} & \begin{tabular}{l}
Check the \\
Units Used to Measure the Natural Gas and Enter the \\
Quantity Used this Period
Therms
Cubic feet (CF)
Hundreds of CF (CCF)
Thousands of CF (MCF)
Other \(\qquad\)
\end{tabular} & \multicolumn{3}{|l|}{Circle the Letter that Indicates How the Quantity Used was Determined A=Actual E=Estimated R=Read by Customer} & \begin{tabular}{l}
Enter the \\
Total Dollar Amount (including taxes and other charges) for this Billing Period \({ }^{\text {a }}\) (US\$ 000.)
\end{tabular} \\
\hline 1 & & S & D & B & & A & E & R & \\
\hline 2 & & S & D & B & & A & E & R & \\
\hline 3 & & S & D & B & & A & E & R & \\
\hline 4 & & S & D & B & & A & E & R & \\
\hline 5 & & S & D & B & & A & E & R & \\
\hline 6 & & S & D & B & & A & E & R & \\
\hline 7 & & S & D & B & & A & E & R & \\
\hline 8 & & S & D & B & & A & E & R & \\
\hline 9 & & S & D & B & & A & E & R & \\
\hline 10 & & S & D & B & & A & E & R & \\
\hline 11 & & S & D & B & & A & E & R & \\
\hline 12 & & S & D & B & & A & E & R & \\
\hline 13 & & S & D & B & & A & E & R & \\
\hline 14 & & S & D & B & & A & E & R & \\
\hline 15 & & S & D & B & & A & E & R & \\
\hline 16 & & S & D & B & & A & E & R & \\
\hline 17 & & S & D & B & & A & E & R & \\
\hline 18 & & S & D & B & & A & E & R & \\
\hline
\end{tabular}
a. Include in the Total Dollar Amount for this Billing Period all state and local taxes, fuel adjustment charges and system charges (minimum bill or base charge). Exclude merchandise, repairs, and service charges. If the household is on the budget plan, do not provide the budgeted bill; instead, provide the dollar amount that is the cost of the actual consumption in the period.
2.1 Did this household participate in any demand response, demand side management, energy efficiency, or conservation programs sponsored by your company in calendar year 2009?
```

YES - Continue to Item 2.2
NO - Skip to Step 3
DON'T KNOW - Skip to Step 3

```
2.2 Please indicate below what Demand Response, Demand Side Management (DSM), energy efficiency, or conversation programs this household participated in during calendar year 2009.
\begin{tabular}{|l|l|}
\hline \begin{tabular}{l} 
A. Home energy audit \\
An examination of the home to determine ways in which energy could \\
be saved.
\end{tabular} & \begin{tabular}{l} 
YES \\
NO
\end{tabular} \\
\hline \begin{tabular}{ll} 
B. Rebates for Equipment or Appliances \\
Utility sponsored incentives to reduce the cost of new heating \\
equipment, cooling equipment, water heating tanks, refrigerators, and \\
other appliances.
\end{tabular} & YES \\
\hline \begin{tabular}{l} 
C. Home Insulation and Weatherization Services \\
Installation of energy efficient windows or doors, caulking, \\
weatherstripping, or home insulation.
\end{tabular} & DON'T KNOW \\
\hline
\end{tabular}
3. Please provide the following information for the person who completed this form. Please print.

Name: \(\qquad\)
Company: \(\qquad\)
Telephone: \(\qquad\)
E-mail Address: \(\qquad\)
Fax Number: \(\qquad\)
4. Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
Or you may FAX the completed form to The Contractor at NNN-NNN-NNNN

For Office Use Only:
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline \[
\begin{gathered}
\text { Fuel } \\
9
\end{gathered}
\] & \[
\begin{gathered}
\text { Unit } \\
10
\end{gathered}
\] & Beginning Date
\(11-16\) & Ending Date 17-22 & \[
\begin{gathered}
\mathrm{R} \\
23
\end{gathered}
\] & \[
\begin{aligned}
& \text { Periods } \\
& 30-31
\end{aligned}
\] & \[
\begin{aligned}
& \text { F/L } \\
& 35
\end{aligned}
\] \\
\hline 2 & & & & & & \\
\hline
\end{tabular}

\title{
2009 Answers to Frequently Asked Questions
}

\author{
About the Household Natural Gas Usage Form
}

\section*{What is the purpose of the Residential Energy Consumption Survey?}

The Residential Energy Consumption Survey (RECS) collects data on energy consumption and expenditures in U.S. housing units. Over 15,000 statistically selected households across the U.S. have already provided information about their household, the physical characteristics of their housing unit, their energy-using equipment, and their energy suppliers. Now we are requesting the energy billing records for these households from each of their energy suppliers. After all this information has been collected, the information will be used to publish aggregate statistics on the consumption and expenditures of energy by U.S. households and used to help determine future U.S. energy needs.

\section*{What is the purpose of this form?}

The purpose of this form is to obtain information on the total consumption of, and charges for, natural gas from underground pipes for the household identified on the front of the enclosed data collection form.

\section*{How do I know this is a valid U.S. Government survey?}

All U.S. Government surveys are required to be reviewed by the U.S. Office of Management and Budget (OMB). An OMB approved survey will have a valid OMB number and expiration date on the data collection form. You are not required to respond to this form unless it displays a currently valid OMB control number. You will find the OMB approval number and expiration date at the top left-hand corner of this form. In addition, if you wish to contact someone at the U.S. Department of Energy to verify that this is a valid survey, call Chip Berry at (202) 586-5543 or you can e-mail him at james.berr@eia.doe.gov.

\section*{What data are to be reported?}

The total consumption to be reported is all the individual amounts delivered to the household during the period from October 1, 2008, to March 31, 2010. If the household has been a customer at the specified address for less than this period, just report the household's consumption at that address for whatever period you have data in your records. All dollar amounts should be reported in U.S. dollars and cents.

\section*{Who is conducting the survey?}

The sponsor of this survey, the Energy Information Administration of the U.S. Department of Energy, has contracted with a Contractor to collect the information for the Residential Energy Consumption Survey. The Contractor is a well respected survey research firm. You will return your completed forms to the Contractor.

\section*{How long will it take to complete this form?}

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time of reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the collection of information.

\section*{Why must I fill out this form? Why is my response mandatory?}

This report is required by law. The timely submission of Form EIA-457F by those required to report is manda-tory under Section 13(b) of the Federal Energy Administration Act of 1974 (FEAA) (Public Law 93-275), as amended. Failure to respond may result in a civil penalty of not more than \(\$ 2,750\) per day for each violation, or a fine of not
more than \(\$ 5,000\) per day for each willful violation. The government may bring a civil action to prohibit reporting violations which may result in a temporary restraining order or a preliminary or permanent injunction without bond. In such civil action, the court may also issue mandatory injunctions commanding any person to comply with these reporting requirements.

\section*{How may I report these data? What format can I use?}

Data may be submitted directly on the enclosed data collection form. Other formats, such as computer-generated listings, which provide all the information requested and are convenient for your company may also be used. If some other format is used, please clearly indicate where each piece of the requested information on this form is listed.

\section*{When is this form due?}

Unless otherwise specified, this data collection form is due by MM-DD-YYYY. You are encouraged to submit the completed form prior to the due date.

\section*{How are the data protected and kept confidential?}

Any information collected that might permit the identification of respondents or their households will be kept confidential and used only for statistical purposes. Data that can be identified with individual respondents will not be disclosed or released by the Contractor to anyone for any other purpose, except as required by law. If you are concerned about individual account information, you may choose to mark out the account number or name on any computer-generated listing that you send us.

\section*{What is the Survey Identification Number (ID)?}

The survey identification number (ID) for each household is above and to the right of the household information on each reporting form. Whenever available, the customer account number is printed beneath the household's address. Please use the survey ID number for the household whenever it is necessary to communicate with the Contractor for clarification or additional information.


\section*{Where do I send the form?}

Please use the enclosed self-addressed envelope to mail the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
You may also FAX the completed form to the Contractor at: (NNN) NNN-NNNN.

\section*{What if I still have questions?}

If you have any further questions concerning this form, please call (800) NNN-NNNN toll free. Ask for the RECS Supplier Survey Specialist. If you wish to contact someone at the U.S. Department of Energy, call Chip Berry at (202) 586-5543 or e-mail him at james.berry@eia.doe.gov.


\title{
Household Electricity Usage Form
}

\section*{Service}

\section*{Address:}

STEP 1 If the customer account number is not shown above, please enter it here.

\section*{Customer Account: \\ \(\qquad\) 1 1 1_1 \\ \(\qquad\) 1 11 _1 1_1 I_I 1 I}

STEP 2 Now, please turn the page and provide the requested information for the household identified above.

Completed forms are due by MM-DD-YYYY. If you have any questions, please call (toll-free) 1-NNN-NNN-NNNN. Ask for the Supplier Survey Specialist..

This report is mandatory under Public Law 93-275, as amended. See the enclosed Answers to Frequently Asked Questions for more details concerning confidentiality and sanctions.

STEP 3 Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
Or you may FAX the completed form to The Contractor at NNN-NNN-NNNN
"Title 18 U.S.C. 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction."

\footnotetext{
Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this reporting burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to the Energy Information Administration, Statistics and Method Group, EI-70, 1000 Independence Avenue, SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.
}
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline Billing Period & Enter the Date the Meter Was Read (Month/Day/Year) for each Billing Period & \multicolumn{3}{|l|}{\begin{tabular}{l}
Circle the Letter that Indicates if the Electricity was Sold, Delivered, or Both S=Sold Only \\
D=Delivered Only \\
\(\mathrm{B}=\) Both Sold and Delivered
\end{tabular}} & Enter the Number of Kilowatt Hours (kWh) Used this Period & \multicolumn{3}{|l|}{Circle the Letter that Indicates How the kWh Used was Determined A=Actual E=Estimated \(\mathrm{R}=\) Read by Customer} & \begin{tabular}{l}
Enter the \\
Total Dollar Amount (including taxes and other charges) for this Billing Period \({ }^{\text {a }}\) \\
(US\$ 000.)
\end{tabular} \\
\hline 1 & & S & D & B & & A & E & R & \\
\hline 2 & & S & D & B & & A & E & R & \\
\hline 3 & & S & D & B & & A & E & R & \\
\hline 4 & & S & D & B & & A & E & R & \\
\hline 5 & & S & D & B & & A & E & R & \\
\hline 6 & & S & D & B & & A & E & R & \\
\hline 7 & & S & D & B & & A & E & R & \\
\hline 8 & & S & D & B & & A & E & R & \\
\hline 9 & & S & D & B & & A & E & R & \\
\hline 10 & & S & D & B & & A & E & R & \\
\hline 11 & & S & D & B & & A & E & R & \\
\hline 12 & & S & D & B & & A & E & R & \\
\hline 13 & & S & D & B & & A & E & R & \\
\hline 14 & & S & D & B & & A & E & R & \\
\hline 15 & & S & D & B & & A & E & R & \\
\hline 16 & & S & D & B & & A & E & R & \\
\hline 17 & & S & D & B & & A & E & R & \\
\hline 18 & & S & D & B & & A & E & R & \\
\hline
\end{tabular}
a. Include in the Total Dollar Amount for this Billing Period all state and local taxes, fuel adjustment charges and system charges (minimum bill or base charge). Exclude merchandise, repairs, and service charges. If the household is on the budget plan, do not provide the budgeted bill; instead, provide the dollar amount that is the cost of the actual consumption in the period.
2.1 Did this household participate in any demand response, demand side management, energy efficiency, or conservation programs sponsored by your company in calendar year 2009?
```

YES - Continue to Item 2.2
NO - Skip to Step 3
DON'T KNOW - Skip to Step 3

```
2.2 Please indicate below what Demand Response, Demand Side Management (DSM), energy efficiency, or conversation programs this household participated in during calendar year 2009.
\begin{tabular}{|l|l|}
\hline \begin{tabular}{l} 
D. Home energy audit \\
An examination of the home to determine ways in which energy could \\
be saved.
\end{tabular} & \begin{tabular}{l} 
YES \\
NO \\
DON'T KNOW
\end{tabular} \\
\hline \begin{tabular}{l} 
E. Rebates for Equipment or Appliances \\
Utility sponsored incentives to reduce the cost of new heating \\
equipment, cooling equipment, water heating tanks, refrigerators, and \\
other appliances.
\end{tabular} & YES \\
\hline \begin{tabular}{l} 
F. Home Insulation and Weatherization Services \\
Installation of energy efficient windows or doors, caulking, \\
weatherstripping, or home insulation.
\end{tabular} & DON'T KNOW \\
\hline
\end{tabular}
3. Please provide the following information for the person who completed this form. Please print.

Name: \(\qquad\)
Company: \(\qquad\)
Telephone: \(\qquad\)
4. Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
E-mail Address: \(\qquad\)
Fax Number \(\qquad\)
Date: \(\qquad\)

Or you may FAX the completed form to
The Contractor at NNN-NNN-NNNN


\title{
2009 Residential Energy Consumption Survey
}

\author{
Answers to Frequently Asked Questions About the Household Electricity Usage Form \\ \section*{What is the purpose of the Residential Energy Consumption Survey?}
}

The Residential Energy Consumption Survey (RECS) collects data on energy consumption and expenditures in U.S. housing units. Over 15,000 statistically selected households across the U.S. have already provided information about their household, the physical characteristics of their housing unit, their energy-using equipment, and their energy suppliers. Now we are requesting the energy billing records for these households from each of their energy suppliers. After all this information has been collected, the information will be used to publish aggregate statistics on the consumption and expenditures of energy by U.S. households and used to help determine future U.S. energy needs.

\section*{What is the purpose of this form?}

The purpose of this form is to obtain information on the total consumption of, and charges for, electricity for the household identified on the front of the enclosed data collection form.

\section*{How do I know this is a valid U.S. Government survey?}

All U.S. Government surveys are required to be reviewed by the U.S. Office of Management and Budget (OMB). An OMB approved survey will have a valid OMB number and expiration date on the data collection form. You are not required to respond to this form unless it displays a currently valid OMB control number. You will find the OMB approval number and expiration date at the top left-hand corner of this form. In addition, if you wish to contact someone at the U.S. Department of Energy to verify that this is a valid survey, call Chip Berry at (202) 586-5543 or you can e-mail him at james.berry@eia.doe.gov.

\section*{What data are to be reported?}

The total consumption to be reported is all the individual amounts delivered to the household during the period from October 1, 2008, to March 31, 2010. If the household has been a customer at the specified address for less than this period, just report the household's consumption at that address for whatever period you have data in your records. All dollar amounts should be reported in U.S. dollars and cents.

\section*{Who is conducting the Survey?}

The sponsor of this survey, the Energy Information Administration of the U.S. Department of Energy, has contracted with a Contractor to collect the information for the Residential Energy Consumption Survey. The Contractor is a well respected survey research firm. You will return your completed forms to the Contractor.

\section*{How long will it take to complete this form?}

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time of reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the collection of information.

\section*{Why must I fill out this form? Why is my response mandatory?}

This report is required by law. The timely submission of Form EIA-457E by those required to report is manda-tory
under Section 13(b) of the Federal Energy Administration Act of 1974 (FEAA) (Public Law 93-275), as amended. Failure to respond may result in a civil penalty of not more than \(\$ 2,750\) per day for each violation, or a fine of not more than \(\$ 5,000\) per day for each willful violation. The government may bring a civil action to prohibit reporting violations which may result in a temporary restraining order or a preliminary or permanent injunction without bond. In such civil action, the court may also issue mandatory injunctions commanding any person to comply with these reporting requirements.

\section*{How may I report these data? What format can I use?}

Data may be submitted directly on the enclosed data collection form. Other formats, such as computer-generated listings, which provide all the information requested and are convenient for your company may also be used. If some other format is used, please clearly indicate where each piece of the requested information on this form is listed.

\section*{When is this form due?}

Unless otherwise specified, this data collection form is due by MM-DD-YYYY. You are encouraged to submit the completed form prior to the due date.

\section*{How are the data protected and kept confidential?}

Any information collected that might permit the identification of respondents or their households will be kept confidential and used only for statistical purposes. Data that can be identified with individual respondents will not be disclosed or released by The Contractor to anyone for any other purpose, except as required by law. If you are concerned about individual account information, you may choose to mark out the account number or name on any computer-generated listing that you send us.

\section*{What is the Survey Identification Number (ID)?}

The survey identification number (ID) for each household is above and to the right of the household information on each reporting form. Whenever available, the customer account number is printed beneath the household's address. Please use the survey ID number for the household whenever it is necessary to communicate with The Contractor for clarification or additional information.


\section*{Where do I send the form?}

Please use the enclosed self-addressed envelope to mail the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
You may also FAX the completed form to the Contractor at: (NNN) NNN-NNNN.

\section*{What if I still have questions?}

If you have any further questions concerning this form, please call (800) NNN-NNNN toll free. Ask for the RECS Supplier Survey Specialist. If you wish to contact someone at the U.S. Department of Energy, call Chip Berry at (202) 586-5543 or e-mail him at james.berry@eia.doe.gov.


\title{
2009 Residential Energy Consumption Survey
}

\author{
Sponsored by the Energy Information Administration
}
U.S. Department of Energy

Washington, DC 20585

\title{
Household Fuel Oil or Kerosene Usage Form
}

\section*{Service \\ Address:}

STEP1 If the customer account number is not shown on the label, please enter it here.


STEP 2 Now, please turn the page and answer the seven questions for the household identified above.

Completed forms are due by MM-DD-YYYY. If you have any questions, please call (toll-free) 1-NNN-NNN-NNNN. Ask for the Supplier Survey Specialist.

This report is mandatory under Public Law 93-275, as amended. See the enclosed Answers to Frequently Asked Questions for more details concerning confidentiality and sanctions.

STEP 3 Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code
Or you may FAX the completed form to The Contractor at NNN-NNN-NNNN.
"Title 18 U.S.C. 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction."

\footnotetext{
Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this reporting burden estimate or any other aspect of this data collection, including suggestions for reducing this burden, to the Energy Information Administration, Statistics and Method Group, El-70, 1000 Independence Avenue, SW, Washington, DC 20585, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.
}
1. Please provide information on all deliveries to this household from October 1, 2008 to March 31, 2010.
\begin{tabular}{|c|c|c|c|c|c|c|c|c|}
\hline Delivery Number & Enter the Delivery Date (Month/Day/Year) & \multicolumn{4}{|l|}{\begin{tabular}{l}
Circle the type of fuel sold to the household Type of Fuel Sold \({ }^{\text {a }}\) 1 = Fuel Oil \#1 \\
2 = Fuel Oil \#2 \\
\(\mathrm{K}=\) Kerosene \\
\(\mathrm{O}=\mathrm{Other}\)
\end{tabular}} & Enter the Number of Gallons of Fuel Delivered to the Household (Gallons) & Enter the Price per Gallon (U.S. \$0.00) & Enter the Total Dollar Amount (including taxes and other charges) for this Delivery \({ }^{\text {b }}\) (US\$ 000.) \\
\hline 1 & & 1 & 2 & K & O & & & \\
\hline 2 & & 1 & 2 & K & 0 & & & \\
\hline 3 & & 1 & 2 & K & 0 & & & \\
\hline 4 & & 1 & 2 & K & 0 & & & \\
\hline 5 & & 1 & 2 & K & 0 & & & \\
\hline 6 & & 1 & 2 & K & 0 & & & \\
\hline 7 & & 1 & 2 & K & 0 & & & \\
\hline 8 & & 1 & 2 & K & 0 & & & \\
\hline 9 & & 1 & 2 & K & 0 & & & \\
\hline 10 & & 1 & 2 & K & O & & & \\
\hline 11 & & 1 & 2 & K & O & & & \\
\hline 12 & & 1 & 2 & K & 0 & & & \\
\hline 13 & & 1 & 2 & K & 0 & & & \\
\hline 14 & & 1 & 2 & K & O & & & \\
\hline 15 & & 1 & 2 & K & 0 & & & \\
\hline 16 & & 1 & 2 & K & 0 & & & \\
\hline 17 & & 1 & 2 & K & 0 & & & \\
\hline 18 & & 1 & 2 & K & 0 & & & \\
\hline
\end{tabular}
a. Fuel oil \#1 is a light distillate fuel oil intended for use in vaporizing pot-type burners. Fuel oil \#2 is a distillate fuel oil for use in atomizing type burners for domestic heating burner units. Kerosene includes No. 1-K and No. 2-K, and all grades of kerosene called range or stove oil. Other includes any oil other than fuel oil \#1, fuel oil \#2, or kerosene. If the oil delivered is a mixture, circle "Other" and give the types of oil and proportions of each in Question 2.
b. Include in the Total Dollar Amount for this Billing Period all state and local taxes, fuel adjustment charges and system charges (minimum bill or base charge). Exclude merchandise, repairs, and service charges. If the household is on the budget plan, do not provide the budgeted bill; instead, provide the dollar amount that is the cost of the actual consumption in the period.

For Office Use Only:

2. If some other type of fuel was delivered to the household ("Other" was circled for type of fuel in Question 1), what fuel was sold? Write in the type of fuel on the lines below. If a mixture of fuels was sold, write in the types of fuels and the proportion of each.
3. What is the capacity, in gallons, of this household's storage tank(s)? Enter the capacity for the two largest tanks (if there is more than one) in the boxes below. If the capacity is not known, write "Not Known" in the box.

4. Was this household your customer as of January 1, 2009 ?
\(\square\) Yes \(\rightarrow\) Go to Question 5 .
\(\square\) No
4a. If no, what was the date this household became a customer of your company? Enter the date in the box below. If you don't know the date or the household was never a customer, check the appropriate answer below the box.
Don't know the dateHousehold was never a customer
5. Is this household currently your customer?

Yes \(\rightarrow\) Go to Question 6.
No
5a. If no, what was the date when this household stopped being a customer of your company? Enter the date in the box below. If you don't know the date or the household was never a customer, check the appropriate answer below the box.
Don't know the dateHousehold was never a customer
6. What was the source of the information about deliveries to this household? Mark all sources of information that apply.

From the company records
\(\square\) An estimate made by a company representative
\(\square\) Information secured from the customer
7. Please provide the following information for the person who completed this form. Please print.

Name: \(\qquad\)
Company: \(\qquad\)
Telephone: \(\qquad\)
E-mail Address: \(\qquad\)
Fax Number: \(\qquad\)
Date: \(\qquad\)

USE THIS SPACE FOR ANY ADDITIONAL NOTES TO EXPLAIN YOUR ENTRIES ON THIS FORM

Use the enclosed self-addressed envelope and return the completed form to:
U.S. Department of Energy c/o The Contractor
Contractor's Street Address
Contractor's City, State, and Zip Code
Or you may FAX the completed form to The Contractor at NNN-NNN-NNNN.

\footnotetext{
Form EIA-457G (2009) - Household Fuel Oil or Kerosene Usage Form; OMB No. 1905-0092, Expiring Month DD, 20YY
}

\title{
2009 Energy Consumption Survey
}

Answers to Frequently Asked Questions About the Household Fuel Oil or Kerosene Usage Form

\section*{What is the purpose of the Residential Energy Consumption Survey?}

The Residential Energy Consumption Survey (RECS) collects data on energy consumption and expenditures in U.S. housing units. Over 15,000 statistically selected households across the U.S. have already provided information about their household, the physical characteristics of their housing unit, their energy-using equipment, and their energy suppliers. Now we are requesting the energy billing records for these households from each of their energy suppliers. After all this information has been collected, the information will be used to publish aggregate statistics on the consumption and expenditures of energy by U.S. households and used to help determine future U.S. energy needs.

\section*{What is the purpose of this form?}

The purpose of this form is to obtain information on the total consumption of, and charges for, fuel oil or kerosene for the household identified on the front of the enclosed data collection form.

\section*{How do I know this is a valid U.S. Government survey?}

All U.S. Government surveys are required to be reviewed by the U.S. Office of Management and Budget (OMB). An OMB approved survey will have a valid OMB number and expiration date on the data collection form. You are not required to respond to this form unless it displays a currently valid OMB control number. You will find the OMB approval number and expiration date at the top left-hand corner of this form. In addition, if you wish to contact someone at the U.S. Department of Energy to verify that this is a valid survey, call Chip Berry at (202) 586-5543 or you can e-mail him at james.berry@eia.doe.gov.

\section*{What data are to be reported?}

The total consumption to be reported is all the individual amounts delivered to the household during the period from October 1, 2008 to March 31, 2009. If the household has been a customer at the specified address for less than this period, just report the household's consumption at that address for whatever period you have data in your records. All dollar amounts should be reported in U.S. dollars and cents.

\section*{Who is conducting the survey?}

The sponsor of this survey, the Energy Information Administration of the U.S. Department of Energy, has contracted with a Contractor to collect the information for the Residential Energy Consumption Survey. The Contractor is a well respected survey research firm. You will return your completed forms to the Contractor.

\section*{How long will it take to complete this form?}

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time of reviewing instructions, searching existing data records, gathering and maintaining the data needed, and completing and reviewing the collection of information.

\section*{Why must I fill out this form? Why is my response mandatory?}

This report is required by law. The timely submission of Form EIA-457G by those required to report is manda-tory under Section 13(b) of the Federal Energy Administration Act of 1974 (FEAA) (Public Law 93275), as amended. Failure to respond may result in a civil penalty of not more than \(\$ 2,750\) per day for each violation, or a fine of not more than \(\$ 5,000\) per day for each willful violation. The government may bring a civil action to prohibit reporting violations which may result in a temporary restraining order or a preliminary or permanent injunction without bond. In such civil action, the court may also issue mandatory injunctions commanding any person to comply with these reporting requirements.

\section*{How may I report these data? What format can I use?}

Data may be submitted directly on the enclosed data collection form. Other formats, such as computergenerated listings, which provide all the information requested and are convenient for your company may also be used. If some other format is used, please clearly indicate where each piece of the requested information on this form is listed.

\section*{When is this form due?}

Unless otherwise specified, this data collection form is due by MM-DD-YYYY. You are encouraged to submit the completed form prior to the due date.

\section*{How are the data protected and kept confidential?}

Any information collected that might permit the identification of respondents or their households will be kept confidential and used only for statistical purposes. Data that can be identified with individual respondents will not be disclosed or released by the Contractor to anyone for any other purpose, except as required by law. If you are concerned about individual account information, you may choose to mark out the account number or name on any computer-generated listing that you send us.

\section*{What is the Survey Identification Number (ID)?}

The survey identification number (ID) for each household is in the upper right-hand corner of the household label on the front of each reporting form. Whenever available, the customer account number is printed beneath the household's address on the label. Please use the survey ID number for the household whenever it is necessary to communicate with the Contractor for clarification or additional information.


\section*{Where do I send the form?}

Please use the enclosed self-addressed envelope to mail the completed form to:
U.S. Department of Energy
c/o The Contractor
Contractor's Street Address
Contractor's City, State, and ZIP Code

You may also FAX the completed form to the Contractor at: (NNN) NNN-NNNN.

\section*{What if I still have questions?}

If you have any further questions concerning this form, please call (800) NNN-NNNN toll free. Ask for the RECS Supplier Survey Specialist. If you wish to contact someone at the U.S. Department of Energy, call Chip Berry at (202) 586-5543 or e-mail him at james.berry@eia.doe.gov.```


[^0]:    CIR-6 WALLTYPE INTERVIEWER INSTRUCTION: RECORD THE MAJOR OUTSIDE WALL CONSTRUCTION MATERIAL FOR THIS HOUSING UNIT ON PAGE 6 OF THE HOUSING UNIT NOTES/MEASUREMENT BOOKLET FOR THIS CASE. IF TWO OR MORE MATERIALS ARE USED, RECORD ONLY THE ONE MOST USED.
    Brick. ..... 01
    Wood. ..... 02
    Siding (Aluminum, vinyl, or steel) ..... 03
    Stucco ..... 04
    Composition (Shingle) ..... 05
    Stone ..... 06
    Concrete or concrete block ..... 07
    Glass. ..... 08
    Other (Specify ..... 09
    Indescribable ..... 10

    CIR-7 ROOFTYPE INTERVIEWER INSTRUCTION: RECORD THE MAJOR ROOF MATERIAL FOR THIS HOUSING UNIT ON PAGE 6 OF THE HOUSING UNIT NOTES/MEASUREMENT BOOKLET FOR THIS CASE. IF TWO OR MORE MATERIALS ARE USED, RECORD ONLY THE ONE MOST USED
    Ceramic or clay tiles ..... 01
    Wood shingles/shakes ..... 02
    Metal ..... 03
    Slate or synthetic slate ..... 04
    Composition shingles ..... 05
    Asphalt ..... 06
    Concrete tiles ..... 07
    Other (Specify ..... 09
    Indescribable ..... 10

    CIR-8 CONFIRM Before we begin, I would like to confirm that I am at the correct address. Do you live at [ENTER THE ADDRESS, CITY, STATE, AND ZIP CODE FROM THE CASE MANAGEMENT SYSTEM]?
    

    ## Section A: HOUSING UNIT CHARACTERISTICS

    I'd like to start with some general questions about your home including the number of rooms and the home's age.

    A-1 CNFRMHUQ My observation is that this residence is a [NAME THE TYPE OF HOUSING UNIT AS RECORDED IN CIR-4]. Do you agree with my observation?

    Yes ................................................ 1
    No
    A-1a [If CNFRMHUQ=0] ALTHUQ Which of the following do you believe best describes this home? Is it a...

    Single-family detached house,
    2
    a Single-family attached house, ............................................. 3
    an Apartment building with 2-4 units, .................................... 4
    an Apartment building 5 or more units, or............................... 5
    a Mobile home? ....................................................................... 1
    A-1a1 REVHUQ INTERVIEWER INSTRUCTION: IF YOU AGREE WITH THE
    HOUSEHOLDS' DESCRIPTION, RECORD "Use Householder's Description" BELOW, AND USE THE ALTERNATIVE AS THE TYPE OF HOUSING UNIT THROUGHOUT THE REMAINDER OF THE INTERVIEW.

    IF YOU DISAGREE WITH THE HOUSEHOLDER'S DESCRIPTION, RECORD "Use RECS Definition" BELOW AND TELL THE HOUSEHOLDER THAT: Using the definitions given to me by the Department of Energy, they would describe this home as a [ENTER THE TYPEHUQ HERE]. But I have recorded that you have described this home as a [ENTER THE ALTHUQ HERE] and will describe it as you have.

    Use Householder's Definition ...................... 1
    Use RECS Definition ................................... 2

    A-2 [If TYPEHUQ=4] CONVERSION First, I have a few questions about the structure in which you live. Was this structure originally designed and built as an apartment building or was it converted into an apartment building?

    Built as an apartment building 1

    Converted into an apartment building......................... 2
    A-2a [If CONVERSION=2] ORIG1FAM Was this structure originally built as a single-family house?

    Yes.................................................. 1
    No .................................................... 0
    A-2a1 [If ORIG1FAM=1] LOOKLIKE Is the part of this structure where you live more like a single-family house, or more like an apartment?

    More like a single-family house ..................... 1
    More like an apartment................................... 2

    ```
    A-3 [If CONVERSION=1 or TYPEHUQ=5] STUDIO Is your apartment a one-room efficiency or studio
    apartment?
        Yes ........................................... ```

